2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21554

FILED Mar 21, 2006 Secretary of State

Entity Name: HOLY TEMPLE #3 CHURCH OF CHRIST UPON THE ROCK OFTHE APOSTOLIC FAITH, INC. **Current Principal Place of Business: New Principal Place of Business:** 1215 EAST 109TH, AVENUE TAMPA, FL 33612 **Current Mailing Address: New Mailing Address:** 1215 EAST 109TH. AVENUE TAMPA, FL 33612 FEI Number: 65-0002997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, ELDER ALLEN 910 MAYDÉLL CT. TAMPA, FL 33619 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOHNSON, ELDER ERNES, T Name: Name: Address: 44701 NW 65 AVE Address: City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, ELDER ALLEN, Name: Name: Address: 910 MAYDELL CT Address: City-St-Zip: TAMPA, FL City-St-Zip: Title: () Delete Title: () Change () Addition MURCHINSON, DEAC. ERN, EST Name: Name: Address: 5801 SW 16TH ST Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELDER ALLEN JOHNSON VD 03/21/2006