


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # N22209
 1. Entity Name
TITUS HARVEST DOME SPECTRUM CHURCH, INC.



Principal Place of Business Mailing Address
 12335 ATLANTIC BLVD. 10551 BEACN BLVD.
 JACKSONVILLE, FL 32225 US JACKSONVILLE, FL 32246 US

DO NOT WRITE IN THIS SPACE



04092007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3025228	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 WASHINGTON, RODNEY J
 9960 BYRNES RD
 JACKSONVILLE, FL 32246

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WASHINGTON, RODNEY J SR. 9960 BYRNES ROAD JACKSONVILLE, FL 32246
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WASHINGTON, APRIL 9960 BYRNES ROAD JACKSONVILLE, FL 32246
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PETTIWAY, BRODERICK 808 ALDEN RD JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REFOUR, FAYE 198 ARORA BLVD ORANGE PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WASHINGTON, ABRAHAM L 9960 BYRNES ROAD JACKSONVILLE, FL 32246
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000731075
 05/08/07-80105-011 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Justin R. J. W...* **APRIL 15TH 2007**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #