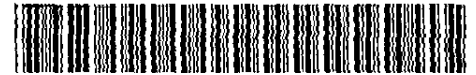


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2006 08:00 AM
Secretary of State

DOCUMENT # N32669	
1. Entity Name HOLY TEMPLE OF GOD HOLINESS CHURCH, INC.	

Principal Place of Business %JUDSON WEBB 4550 39TH AVENUE VERO BEACH FL 32967	Mailing Address PO BOX 276 VERO BEACH FL 32961
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0123556	☐ Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WEBB, JUDSON 4550 39TH AVENUE VERO BEACH FL 32927

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEBB, JUDSON 4550 39TH AVENUE VERO BEACH FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MILLS, DEBRA A 2494 SE WASHINGTON ST STUART FL 34997 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREEN, BRENDA D 5830- 58TH CT VERO BEACH FL 32967 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WEBB, DEMETRIS D. 4550 39TH AVE VERO BEACH FL 32967 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WEBB, TRESSIE L 4550 39TH AVE VERO BEACH FL 32967 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add 000000451732 03/10/06-80067-001 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Debra A. Mills*

Feb. 18, 2006