2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35520

FILED Apr 30, 2009 Secretary of State

Entity Name: TRUE GOSPEL HOLINESS CHURCH OF JESUS, INC.

Current Principal Place of Business: New Principal Place of Business: 907 W SOUTH ST ORLANDO, FL 32805 US **Current Mailing Address: New Mailing Address:** 1884 TORREY DRIVE ORLANDO, FL 32818 US FEI Number: 59-3168815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, LAWRENCE D. 925 S. DEŃNING DR. SUITE 4 WINTER PARK, FL 32789 US 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: (X) Change () Addition () Delete WILLIAMS, NETTIE J. WILLIAMS, NETTIE J. Name: Name: 501 SUNSET DR. Address: 1884 TORREY DRIVE Address: ORLANDO, FL ORLANDO, FL 32818 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: WILLIAMS, JOANN Name: WILLIAMS, JOANN Address: 501 SUNSET DR. Address: 1884 TORREY DRIVE City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32818 Title: () Delete Title: () Change () Addition WATSON, MILDRED Name: Name: 4277 GALLIMORE ST. Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: WILLIAMS, MICHAEL J Name: Address: 7173 CORAL DRIVE Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: () Delete Title: () Change () Addition GLENN, MICKEY Name: Name: 5437 REATA WAY Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NETTIE J. WILLIAMS PD 04/30/2009