## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N39543

Apr 27, 2012 Secretary of State

Entity Name: CONGREGATIONAL HOLINESS CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

7036 E. ANDREWS ST. GLEN ST. MARY, FL 32040

**Current Mailing Address: New Mailing Address:** 

PO BOX 138

GLEN ST. MARY, FL 32040

FEI Number: 59-2260172 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:

BROWN, TERENCE M. 486 N. TÉMPLE AVE. STARKE, FL 32091

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:**

SURRENCY, RONNIE R Name: Address: P O BOX 432 N/A

City-St-Zip: GREEN COVE SPRGS, FL 32043

Title:

Name: LYONS, ORAL E REV Address: P O BOX 138 N/A

City-St-Zip: GLEN ST. MARY, FL 32040

Title:

HODGES, DAVID L Name: Address: 18991 U.S. HWY, 301 N. City-St-Zip: STARKE, FL 32091

Title:

Name: KIRKMAN, DAVID 621 WALL ST. Address: City-St-Zip: LAKE CITY, FL 32025

Title:

DUGGER, GEORGE R Name: 8636 CANTON DR Address: JACKSONVILLE, FL 32221 City-St-Zip:

Title:

LYONS, ORAL E Name: Address: P.O.BOX 138 N/A

GLEN ST. MARY, FL 32040 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: ORAL E. LYONS SEC. 04/27/2012