2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 02, 2004 8:00 am Secretary of State DOCUMENT # N46397 1. Entity Name 04-02-2004 90075 010 ****70.00 HOUSE OF POWER BIBLE STUDY MINISTRIES, INC. Mailing Address Principal Place of Business 7233 N LECANTO HWY P.O. BOX 250 HERNANDO FL 34442 HOLDER FL 34445 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE Applied For City & State City & State 4. FEI Number 59-3107624 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DEHN, GEORGE ROBERT Street Address (P.O. Box Number is Not Acceptable) 7330 N. DAWSON DR. HERNANDO FL 34442 City 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE Change Addition TITLE HOVIOUS, PHYLLIS A. HAVIOUS, PHYLLIS A NAME NAME 6834 N. CASTLEBURY RD. 6834 N. CASTIEBURY RD STREET ADDRESS STREET ADDRESS HERNANDO FL 34442 HERNANDO, FL 34442 CITY-ST-7IP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition DEHN, GEORGE R NAME NAME 7330 N. DAWSON DR. STREET ADDRESS STREET ADDRESS HERNANDO FL 34442 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE DEHN-DOROTHY-NAME NAME 7330 N. DAWSON DR. STREET ADDRESS STREET ADDRESS HERNANDO FL 34442 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE HOVIOUS DAVIDL 6834 N. CASTLE BURY RD HOVIROUS, DAVID L NAME NAME 6834 N. CASTLEBURY STREET ADDRESS STREET ADDRESS HERNANDO FL 34442 HERNAUDO, FL34442 CITY-ST-ZIP C/TY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP

FILED

De HN George SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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