2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47097

FILED Feb 14, 2007 Secretary of State

Entity Name: THE HOUSE OF THE LORD CHRISTIAN CENTER INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
195 SW 6 POMPAN	TH ST O BCH., FL 33060 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
B15 NW 1 POMPAN	9TH CT. O BEACH, FL 33060			
El Number	: 65-0328738 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address o	of New Registered Agent:	
	ARNOLD BISHOP			
B15 NW 1 POMPAN	91H C1. O BEACH, FL 33060 US			
n the Stat	e named entity submits this statement for the p e of Florida.			
SIGNATU		-		
SIGNATU	Electronic Signature of Registered Age	nt	Date	
SIGNATU OFFICER			Date ES TO OFFICERS AND DIRECTORS	
	Electronic Signature of Registered Age			
DFFICER itle: lame: lddress: city-St-Zip: itle: lame: lddress:	Electronic Signature of Registered Age S AND DIRECTORS: PC () Delete MCRAY, ARNOLD BISHOP 315 N.W. 19 CT.	ADDITIONS/CHANGI Title: Name: Address:	ES TO OFFICERS AND DIRECTORS	
OFFICER Fitle: Name: Address:	Electronic Signature of Registered Age S AND DIRECTORS: PC () Delete MCRAY, ARNOLD BISHOP 315 N.W. 19 CT. POMPANO BCH., FL 33060 STD () Delete MCRAY, GWENDOLYN 315 N.W. 19TH CT.	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address:	ES TO OFFICERS AND DIRECTORS () Change () Addition	
DFFICER Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress: Dity-St-Zip: Title: Name: Nddress: Nddress:	Electronic Signature of Registered Age S AND DIRECTORS: PC () Delete MCRAY, ARNOLD BISHOP 315 N.W. 19 CT. POMPANO BCH., FL 33060 STD () Delete MCRAY, GWENDOLYN 315 N.W. 19TH CT. POMPANO BCH., FL 33060 VD () Delete MCDOUGLE, GASTON ELDER 720 N.W. 16TH CT.	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ARNOLD MCRAY PC 02/14/2007