

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47097

FILED  
Apr 10, 2012  
Secretary of State

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

**Current Principal Place of Business:**

195 SW 6TH ST  
POMPANO BCH., FL 33060 US

**New Principal Place of Business:**

**Current Mailing Address:**

315 NW 19TH CT.  
POMPANO BEACH, FL 33060

**New Mailing Address:**

FEI Number: 65-0328738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MCRAY, ARNOLD BISHOP  
315 NW 19TH CT.  
POMPANO BEACH, FL 33060 US

**Name and Address of New Registered Agent:**

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:**

Title: PC  
Name: MCRAY, ARNOLD BISHOP  
Address: 315 N.W. 19 CT.  
City-St-Zip: POMPANO BCH., FL 33060

Title: STD  
Name: MCRAY, GWENDOLYN  
Address: 315 N.W. 19TH CT.  
City-St-Zip: POMPANO BCH., FL 33060

Title: VD  
Name: MCDOUGLE, GASTON ELDER  
Address: 720 N.W. 16TH CT.  
City-St-Zip: POMPANO BCH., FL 33060

Title: S  
Name: HOPE, RITA  
Address: 8301 NW 36TH ST  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D  
Name: JOHNSON, EDDIE MIN.  
Address: 8290 NW 68 AVE  
City-St-Zip: TAMARAC, FL 33321

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: ARNOLD MCRAY

PC

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date