

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N92000000674

1. Entity Name
THE HOLINESS CHURCH OF GOD MOUNTAIN OF OLIVES INT., INC.



Principal Place of Business
1326 WEST WASHINGTON
ORLANDO, FL 32805 US

Mailing Address
P.O.BOX 608746
ORLANDO, FL 32860 US

2. Principal Place of Business

Same

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

4. FEI Number
59-3163487

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AUPOINT, DANIEL R
742 ALFRED DRIVE
ORLANDO, FL 32810

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL 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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME AUPONT, DANIEL
STREET ADDRESS 742 ALFRED DRIVE
CITY-ST-ZIP ORLANDO, FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DE
NAME PIERRE, PRESENDIEU
STREET ADDRESS 4105 NILE STREET
CITY-ST-ZIP ORLANDO, FL 32839

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DE
NAME DESIR, LENET
STREET ADDRESS 5508 PARK HURST DRIVE
CITY-ST-ZIP ORLANDO, FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE T
NAME AUPONT, MARIE C
STREET ADDRESS 742 ALFRED DRIVE
CITY-ST-ZIP ORLANDO, FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE S
NAME THINIS, SHANDRA
STREET ADDRESS 1033 HAMLET DR
CITY-ST-ZIP MAITLAND, FL

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE DE
NAME GERMEUS, JEAN V
STREET ADDRESS 216 N NASHVILLE AVE
CITY-ST-ZIP ORLANDO, FL 32805

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rev Daniel Aupont

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04 - 02 - 04 (407-7224592)

Date

Daytime Phone #

94051610

**FILED
Apr 13, 2004 8:00 am
Secretary of State**

04-13-2004 90034 041 ****61.25