

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003956

FILED
Apr 11, 2012
Secretary of State

Entity Name: FAITH TEMPLE HOLINESS CHURCH, INCORPORATED

Current Principal Place of Business:

1515 LINCOLN AVE, APT B-8
HAMPTON VILLAS-PHASE-1
MT DORA, FL 32757 US

New Principal Place of Business:

Current Mailing Address:

5163 MEYER LN.
HEPHZIBAH, GA 30815 US

New Mailing Address:

1035 ARLINGTON AVE. NO.
APT. 214
SAINT PETERSBURG, FL 33705 US

FEI Number: 59-3187107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ELOUISE
1515 LINCOLN AVE E
MOUNT DORA, FL 32757 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: D
Name: WILLIAMS, ELOUISE
Address: 1617 W CENTRAL BLVD, #114
City-St-Zip: ORLANDO, FL 32805

Title: DP
Name: DIXON, GEORGE
Address: 3044 GRAY FOX DRIVE
City-St-Zip: HEPHZIBAH, GA 30815

Title: SD
Name: JONES, DOROTHY
Address: 1035 ARLINGTON AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: TD
Name: TIMSON, LOUISE
Address: 533 LILY ST
City-St-Zip: ORLANDO, FL 32805

Title: S
Name: PEAKE, DORIS H
Address: 1533 N.ROHODES ST
City-St-Zip: MOUNT DORA, FL 32757

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: ELOUISE WILLIAMS

MS

04/11/2012

Electronic Signature of Signing Officer or Director

Date