

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001033

**FILED**  
**Aug 11, 2010**  
**Secretary of State**

**Entity Name:** COMMUNITY HOLY CHURCH INCORPORATION

**Current Principal Place of Business:**

504 N. 24TH STREET  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

REV. JAMES BARNES  
2711 AVE. F  
FORT PIERCE, FL 34947

**New Mailing Address:**

**FEI Number:** 65-0556547      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BARNES, JAMES REV  
2711 AVE. F  
FORT PIERCE, FL 34947      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:** S  
**Name:** BARNES', ALMA  
**Address:** 2711 AVE. F  
**City-St-Zip:** FORT PIERCE, FL 34947

**Title:** D  
**Name:** BARNES, DEATRICE  
**Address:** 805N27TH.ST  
**City-St-Zip:** FT. PIERCE, FL 34947

**Title:** T  
**Name:** HARRIS, ALMA J  
**Address:** 1018 FULLWOOD AVE  
**City-St-Zip:** CRESCENT CITY, FL 32112 US

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:** ALMA BARNES

S

08/11/2010

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

\_\_\_\_\_  
Date