## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003319

FILED Feb 08, 2006 Secretary of State

Entity Name: MT. MORIAH HOUSE OF GOD SAINTS IN CHRIST OF JACKSONVILLE, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1005 ODESSA ST JACKSONVILLE, FL 32206					
Current Ma	iling Address	<b>s:</b>	New Mailing Addre	New Mailing Address:	
P.O. BOX 9962 JACKSONVILLE, FL 32208					
FEI Number:	59-1287672	FEI Number Applied For ( )	El Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
MOORE, LORENZO 5663 INTERNATIONAL DR JACKSONVILLE, FL 32219 US			6331 DÚNN AVENU	MOORE, LORENZO 6331 DUNN AVENUE JACKSONVILLE, FL 32218 US	
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: LORENZO MOORE				02/08/2006	
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MOORE, LOREN 6331 DUNN AVE JACKSONVILLE	NUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete LEONARD, ERNEST 9435 SAPPINGTON AVE JACKSONVILLE, FL 32208		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete MACK, ALTAMESE 11046 KEY HAVEN BLVD JACKSONVILLE, FL 32218		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete HIGHTOWER, RAFALAR L 2587 SPIREA ST. JACKSONVILLE, FL 32209		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () Delete HOLT, CLEMERTINE 12450 BISCAYNE BLVD #1609 JACKSONVILLE, FL 32218		Title: Name: Address: City-St-Zip:	( ) 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: LORENZO MOORE PD 02/08/2006