2006 NOT-FOR-PROFIT CORPORATION

Apr 27, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # N96000001824 04-27-2006 90167 018 ****61.25 JESUS' HOUSE OF WORSHIP, INC. Mailing Address Principal Place of Business 1000 N SEACREST BLVD. 1000 N SEACREST BLVD. **BOYNTON BEACH, FL 33435 BOYNTON BEACH, FL 33432** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04172006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 65-0656143 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **EVANS, PORTIA** Street Address (P.O. Box Number is Not Acceptable) 1000 N SEACREST BLVD. **BOYNTON BEACH, FL 33432** City 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 fegistered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 Due by May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Defete TITLE Change Addition TITLE GREEN, LAWRENCE NAME STREET ADDRESS 133 SW 15TH AVE. APT 12 STREET ADDRESS DELRAY BEACH, FL 33444 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition GREEN, DIANE NAME NAME STREET ADDRESS 133 SW 15TH AVENUE APT 12 STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33444 CITY-ST-ZIP Delete Change Change TITLE TITLE Addition FUNCHES, EDWARD NAME NAME 10026 BOYNTON PLACE CIRCLE, APT 534 STREET ADDRESS STREET ADDRESS BOCA RATON, FL 33427 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition EVANS, EDDIE D NAME NAME STREET ADDRESS **112 NW 5TH AVE** STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33435 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition ☐ Delete EVANS, PORTIA A NAME NAME STREET ADDRESS STREET ADDRESS 112 NW 5 AVENUE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

BOYNTON BEACH, FL 33435

C/O 1000 N SEACREST BLVD

BOYNTON BEACH, FL 33435

HYERS, ANNIE L

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

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☐ Delete

Change

Addition

FILED