

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004478

FILED  
Jan 28, 2005  
Secretary of State

Entity Name: GOD'S HOUSE OF BLESSING, INC.

## Current Principal Place of Business:

3127 THOMAS ST  
JACKSONVILLE, FL 32254 US

## New Principal Place of Business:

## Current Mailing Address:

3127 THOMAS ST  
JACKSONVILLE, FL 32254 US

## New Mailing Address:

FEI Number: 30-0236936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HARMON, GENA  
3127 THOMAS STREET  
JACKSONVILLE, FL 32254 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: PD ( ) Delete  
Name: HARMON, GENA  
Address: 3127 THOMAS ST  
City-St-Zip: JACKSONVILLE, FL 32254

Title: DV ( ) Delete  
Name: HAMILTON, REGENA  
Address: 3741 WALNUT ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: DS ( ) Delete  
Name: HAMILTON, ROBERT  
Address: 3741 WALNUT ST.  
City-St-Zip: JAX, FL 32206

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: HAMILTON, REGENA  
Address: 7147 OLD KINGS RD. S.  
City-St-Zip: JACKSONVILLE, FL 32217

Title: DS (X) Change ( ) Addition  
Name: HAMILTON, ROBERT  
Address: 7147 OLD KINGS RD. S.  
City-St-Zip: JAX, FL 32217

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GENA HARMON

PD

01/28/2005

Electronic Signature of Signing Officer or Director

Date