

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005719

FILED
Apr 28, 2006
Secretary of State

Entity Name: LION OF JUDAH HOUSE OF WORSHIP, INC.

Current Principal Place of Business:

2548 PARK DRIVE
P.O. BOX 605
SANFORD, FL 327720605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 605
SANFORD, FL 327720605 US

New Mailing Address:

FEI Number: 59-3504217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ABRAMSON, TAMMY
5604 NORTH ROAD
SANFORD, FL 32771 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 () Delete
Name: ABRAMSON, TAMMY
Address: 5604 NORTH ROAD
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: DEBOSE, JUANITA
Address: 1432 MARA COURT
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: HARRELL, SHEILA
Address: 1030 UPSALA ROAD
City-St-Zip: SANFORD, FL 32771

Title: D (X) Delete
Name: GRISSOM, GARY
Address: 200 E. 19TH STREET
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: HARRELL, SHEILA
Address: 414 LAKE BLVD.
City-St-Zip: SANFORD, FL 32771

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

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: TAMMY ABRAMSON

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date