

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002525

FILED
Apr 17, 2009
Secretary of State

Entity Name: HOUSE OF COMFORT AND REFUGE MINISTRIES-GOD'S TEMPLE FOR ALL PEOPLE, INC.

Current Principal Place of Business:

8 SWEET STREET
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2345
HAVANA, FL 323332345

New Mailing Address:

FEI Number: 59-3506719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, LIONEL
1738 HILLSGATE COURT
TALLAHASSEE, FL 32308 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: DC () Delete
Name: LEONARD, LIONEL
Address: P.O. BOX 12181
City-St-Zip: TALLAHASSEE, FL 323172181

Title: D () Delete
Name: CEASOR, SUSIE
Address: P.O. BOX 499
City-St-Zip: HAVANA, FL 323330499

Title: DS () Delete
Name: GLENN, AUDREY
Address: 407 LINCOLN AVENUE
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: LEWIS, SOLOMON
Address: 644 CAMPBELL
City-St-Zip: TALLAHASSEE, FL 32310

Title: D () Delete
Name: CURTIS, CEASOR
Address: P.O. BOX 499
City-St-Zip: HAVANA, FL 32333

Title: DT () Delete
Name: LEWIS, CHARLENE
Address: 644 CAMPBELL STREET
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: LEONARD, BARBARA
Address: P. O. BOX 12181
City-St-Zip: TALLAHASSEE, FL 32317

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LIONEL LEONARD

DC

04/17/2009

Electronic Signature of Signing Officer or Director

Date

Attachment 2009 A/R

Page 1 of 1

4/17/09

Milligan, Michelle

From: Lionel Leonard [ll.leonard@comcast.net]
Sent: Friday, April 17, 2009 11:23 AM
To: Milligan, Michelle
Subject: 2009 Annual Report N98000002525 - Attachment

N98-2525

Ms. Milligan,

Per our telephone conversation, please include the following to House of Comfort and Refuge Ministries-God's Temple for all People, Inc. (N98000002525) 2009 Annual Report:

Officer/Director Detail

Title: D

Green, Claudette
20 Hinson Circle
Havana, FL 32333

Please acknowledge receipt of this email and let me know if there are any questions.

Thanks,

Elder Lionel Leonard
Pastor, House of Comfort and Refuge Ministries
ll.leonard@comcast.net
Phone (850) 321-7673
Fax (850) 386-1537