2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2012
Secretary of State

DOCUMENT# N98000002525

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
Name: LEONARD, LIONEL
Address: P.O. BOX 12181
City-St-Zip: TALLAHASSEE, FL 323172181

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

Title: D
Name: GLENN, AUDREY
Address: 407 LINCOLN AVENUE
City-St-Zip: HAVANA, FL 32333

Title: DS
Name: LEONARD, BARBARA
Address: P. O. BOX 12181
City-St-Zip: TALLAHASSEE, FL 32317

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

Title: D
Name: GREEN, CLAUDETTE
Address: 20 HINSON CIRCLE
City-St-Zip: HAVANA, FL 32333

I hereby 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 all other like empowered.

SIGNATURE: LIONEL LEONARD DC 04/05/2012

Electronic Signature of Signing Officer or Director Date