2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004216

Entity Name: CHURCH OF THE HOLY SPIRITSONG, INC.

FILED Apr 08, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2601 NE 1	OF THE HOLY 4TH AVENUE MANORS, FL (
Current Mailing Address:				New Mailing Address:		
1007 NOR	OF THE HOLY TH FEDERAL JDERDALE, FI					
FEI Number	: 65-0934022	FEI Number Applied For ()	FEI Num	ber Not App	licable ()	Certificate of Status Desired (X)
Name and	l Address of C	urrent Registered Agent:		Name and	Address	of New Registered Agent:
#100	TOM 4TH AVENUE MANORS, FL 3	33334 US				
	named entity s e of Florida.	submits this statement for the	purpose of	changing i	ts registere	ed office or registered agent, or both,
SIGNATUI						
	Electror	ic Signature of Registered Ag	ent			Date
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANG	SES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	PT () MILLNER, TOM 2601 NE 14TH WILTON MANO	AVENUE #100		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VT () TACZAK, SUZA 106 ENGLE RD LAKE WORTH,			Title: Name: Address: City-St-Zip:		(X) Change()Addition DHANNAH H B STREET RTH, FL 33460
Title: Name: Address: City-St-Zip:	DYE, SHERI 15841 PINES E	Delete OULEVARD #132 NES, FL 33027		Title: Name: Address: City-St-Zip:		(X) Change () Addition , DONNA SHINGTON STREET, APT. 6-203 (E PINES, FL 33025
Title: Name: Address: City-St-Zip:	TT () HARDY, TRACE 3691 SILVER L BOYNTON BEA	ACE LANE		Title: Name: Address: City-St-Zip:	1920 SOU	(X) Change () Addition ODRIGUEZ TH OCEAN DRIVE ERDALE, FL 33316
Title: Name: Address: City-St-Zip:	T () BARRETT, DIAI 8930 N. LAKE I DAVIE, FL 333	PARK CIRCLE		Title: Name: Address: City-St-Zip:		(X) Change()Addition TRAUT TH STREET, #B ERDALE, FL 33304
Title: Name: Address: City-St-Zip:	ST () WHITED, ROBI 3101 NW 25TH OAKLAND PAR	TERRACE		Title: Name: Address: City-St-Zip:		() Change () Addition

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: ROBERT S WHITED ST 04/08/2008