

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006780

FILED
Apr 29, 2009
Secretary of State

Entity Name: THE TRIUMPHANT HOLINESS CHURCH OF GOD IN CHRIST JESUS OUR LORD, INCORPORATED

Current Principal Place of Business:

9006 SCOTT WILSON LN.
SUITE C
ODESSA, FL 335563273 US

New Principal Place of Business:

Current Mailing Address:

9006 SCOTT WILSON LN.
SUITE C
ODESSA, FL 335563273 US

New Mailing Address:

FEI Number: 59-3701406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASCO, JOSEPH IVORY SR
9006 SCOTT WILSON LN.
ODESSA, FL 335563273 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: TD () Delete
Name: BLAKLEY, FABIAN
Address: PO BOX 1234
City-St-Zip: OLDSMAR, FL 34677

Title: C () Delete
Name: PASCO, DOROTHY I
Address: 9006 SCOTT WILSON LANE
City-St-Zip: ODESSA, FL 33556

Title: P () Delete
Name: PASCO, JOSEPH I SR
Address: 9006 SCOTT WILSON LN.
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: PASCO, JOSEPH I JR
Address: 5106 E. 28TH AVE.
City-St-Zip: TAMPA, FL 33610 US

Title: V () Delete
Name: CLARK, WILLIE J SR
Address: 2312 HARN RD.
City-St-Zip: CLEARWATER, FL 33764 US

Title: D () Delete
Name: CLARK, SYMPATHY
Address: 2312 HARN RD.
City-St-Zip: CLEARWATER, FL 33764 US

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

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: DOROTHY R PASCO

C

04/29/2009

Electronic Signature of Signing Officer or Director

Date