

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000081416

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** MY FATHER'S HOUSE FELLOWSHIP, INC.

**Current Principal Place of Business:**

479 LANFAIR AVENUE  
SEBASTIAN, FL 32958

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 701480  
WABASSO, FL 32958

**New Mailing Address:**

710 BOWDEN ROAD  
ANDERSON, SC 29626

**FEI Number:** 65-1035948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, BONITA M  
479 LANFAIR AVE  
SEBASTIAN, FL 32958 US

**Name and Address of New Registered Agent:**

SMITH, BONITA M  
479 LANFAIR AVENUE  
SEBASTIAN, FL 32958 US

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

04/27/2011

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SMITH, JOHN J III  
Address: 710 BOWDEN ROAD  
City-St-Zip: ANDERSON, SC 29626

Title: STD  
Name: SMITH, BONITA M  
Address: 479 LANFAIR AVE  
City-St-Zip: SEBASTIAN, FL 32958

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BONITA M. SMITH

STD

04/27/2011

Electronic Signature of Signing Officer or Director

Date