

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000829

**Entity Name:** TRUE HOLY ANNOINTED TEMPLE, INC.

**Current Principal Place of Business:**

780 W. CANTON AVE  
WINTER PARK, FL 32789

**FILED**  
**Feb 24, 2015**  
**Secretary of State**  
**CC7590727113**

**Current Mailing Address:**

PO BOX 180962  
CASSELBERRY, FL 32718

**FEI Number: 73-1677033**

**Certificate of Status Desired: Yes**

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

FREEZE, GOSSIE SSR.  
108 LISA LOOP  
WINTER SPRINGS, FL 32708 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name FREEZE, GOSSIE SSR.  
Address 108 LISA LOOP  
City-State-Zip: WINTER SPRINGS FL 32708

Title V  
Name FREEZE, MILDRED  
Address 108 LISA LOOP  
City-State-Zip: WINTER SPRINGS FL 32708

Title T  
Name NEAL, CLEVELAND JR.  
Address 501 OAK AVE  
City-State-Zip: MAITLAND FL 32794

Title S  
Name FREEZE, REBEKAH J  
Address 108 LISA LOOP  
City-State-Zip: WINTER SPRINGS FL 32708

Title TRUSTEE  
Name LOWMAN, ESPERANZA M  
Address 1435 GLENMORE DR  
City-State-Zip: APOPKA FL 32712

*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: GOSSIE FREEZE**

**PRESIDENT**

**02/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date