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: BETTY G. NEAL

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N06000006470

Entity Name: HOLY GHOST TEMPLE, INC.

Current Principal Place of Business:

520 NORTHWEST 199TH AVE PEMBROKE PINES, FL 33029

Current Mailing Address:

520 NORTHWEST 199TH AVE PEMBROKE PINES, FL 33029

FEI Number: 22-3935274

Name and Address of Current Registered Agent:

RUFF, NORVAL A 520 NW 199 AV PEMBROKE PINES, FL 33029 US

Date

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	DP	Title	DV
Name	RUFF, NORVAL A	Name	RUFF, JOY C
Address	520 NORTHWEST 199TH AVE	Address	520 NORTHWEST 199TH AVE
City-State-Zip:	PEMBROKE PINES FL 33029	City-State-Zip:	PEMBROKE PINES FL 33029
Title	D	Title	S
Name	CLARK, MATTIE	Name	NEAL, BETTY G
Address	520 NORTHWEST 199TH AVE	Address	520 NORTHWEST 199TH AVE
City-State-Zip:	PEMBROKE PINES FL 33029	City-State-Zip:	PEMBROKE PINES FL 33029
Title	т		
Name	NEAL, FREDERECK		
Address	520 NORTHWEST 199TH AVE		
City-State-Zip:	PEMBROKE PINES FL 33029		

SECRETARY

Date

04/25/2013