#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000001874

Entity Name: HOLY GHOST POWER MINISTRY INC.

FILED
Apr 01, 2016
Secretary of State
CC8541755767

# **Current Principal Place of Business:**

4833 LAKE ARJARO DR. WEST PALM BEACH. FL 33407

# **Current Mailing Address:**

4833 LAKE ARJARO DR.

WEST PALM BEACH. FL 33407 US

FEI Number: 74-3242283 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

DARVILLE, ROGER V 4833 LAKE ARJARO DR. WEST PALM BEACH, FL 33407 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 PC, C.E.O. Title VP.T

NameDARVILLE, ROGERNameDARVILLE, MELISSAAddress4833 LAKE ARJARO DR.Address4833 LAKE ARJARO DR.

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

Title E,D. Title E.M

Name GARRETT, EDWINDA F Name FOBBS, DENISHA

Address 5217 PINEWOOD AVE Address 5217 PINEWOOD AVE

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

Title SEC. Title CHAIRMAN

Name FRANCOIS, THAMA J Name JOHNSON, ROBERT

Address 2600 25ST SUITE C Address 1017 21ST

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: W.P.B. FL 33407

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: ROGER DARVILLE

Electronic Signature of Signing Officer/Director Detail

PC, CEO

04/01/2016