FEI Number: 59-3523592			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
NOEL, ABNER PHD 470 NW 108 STREET MIAMI, FL 33168 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	ABNER NOEL			05/01/2014
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	S	
Name	NOEL, ABNER	Name	VIXAMAR, SARAH	
Address	470 NW 108 ST	Address	14560 NE 6 AVE	
City-State-Zip:	MIAMI FL 33168	City-State-Zip:	APT 318 NORTH MIAMI FL 33161	
Title	Т			
Name	ANDRE, CLAUDETTE			
Address	13300 NE 6 AVE 301			

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: ABNER NOEL

City-State-Zip: MIAMI FL 33161

Electronic Signature of Signing Officer/Director Detail

05/01/2014

Date

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001317

Entity Name: TRUE GOSPEL HOLINESS CHRISTIAN CENTER, INC.

Current Principal Place of Business:

8222 NE 2ND AVENUE MIAMI, FL 33138

Current Mailing Address:

8222 NE 2ND AVENUE MIAMI. FL 33138

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FILED May 01, 2014 **Secretary of State** CC8810403794