

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Moriham
Secretary of State
DIVISION OF CORPORATIONS

1995 MAR -3 AM 8:06

DOCUMENT # 733167

(1)

1. Corporation Name

FAITH PRAYER TEMPLE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000001423370

-03/07/95--01119--018

*****61.25 *****61.25

Principal Place of Business

Mailing Address

1281 CAPITOL BLVD.
PENSACOLA FL 32505

1281 CAPITOL BLVD.
PENSACOLA FL 32505

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/25/1975

3a. Date of Last Report

03/07/1994

4. FEI Number

59-3024708

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

BERTRAND, FRANCES C
1281 CAPITAL BLVD
PENSACOLA FL 32505

10. Name and Address of New Registered Agent

81 Name Frances C. Bertrand Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
1281 Capital Blvd
83
84 City Pensacola, FL 85 Zip Code 32505

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0502, Florida Statutes.

SIGNATURE

James Bertrand (President)

1/29/95

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME BERTRAND, FRANCES C
STREET ADDRESS 1281 CAPITAL BLVD.
CITY-ST-ZIP PENSACOLA FL 32505

TITLE V
NAME GRIFFIN, MARY
STREET ADDRESS 1285 CAPITAL BLVD
CITY-ST-ZIP PENSACOLA FL 32505

TITLE S
NAME GREY, RUBY
STREET ADDRESS 1283A CAPITAL BLVD.
CITY-ST-ZIP PENSACOLA FL 32505

TITLE D
NAME GRIFFIN, RANDY
STREET ADDRESS 1285 CAPITAL BLVD.
CITY-ST-ZIP PENSACOLA FL 32505

TITLE D
NAME DAVISON, LINDA
STREET ADDRESS 1202 ALCANIZE ST.
CITY-ST-ZIP PENSACOLA FL 32503

TITLE D
NAME NICKSON, CONNIE
STREET ADDRESS 117 DIEGO CIRCLE
CITY-ST-ZIP PENSACOLA FL 32505

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

James Bertrand

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime / Home #

0071048