SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Jul 16 1998 8:00am ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 Secretary of State DOCUMENT # 733167 FAITH PRAYER CENTER, INC. Principal Place of Business Mailing Address 1281 CAPITOL BLVD. 3. Date incorporated or Qualified 1281 CAPITOL BLVD. PENSACOLA FL 32505 PENSACOLA FL 32505 06/25/1975 4. FEI Number Applied For 59-3024708 Not Applicable 2. Principal Place of Business Mailing Address \$8.75 Additional 5. Certificate of Status Desired Fee Required ND \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association? 32505 8. This corporation owes or has paid the current year intengible Personal Property Tex due June 30. Yes No Country Country Escambia Personal Property Tax due June 30. 29 24 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BERTRAND, FRANCES C 82 1281 CAPITAL BLVD PENSACOLA FL 32505 Zip Code 11. Pursuant to the provisions of sections 617.0502 and 617.1508, 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 (smiller with, and accept the obligations of, section 647.0503, Florida Statutes). SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. roince TITLE Change Addition DELETE **GR**IFFIN, MARY 1.2 NAME NAME 1285 CAPITOL BLVD 1.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32505 1.4 CITY-ST-ZIP CITY-ST-ZIP 2.1 TITLE TITLE Change DELETE 2.2 NAME GREY, RUBY NAME 1283A CAPITAL BLVD. 2.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32505 2.4 CITY-ST-ZIP 32505 CITY-ST-ZIP 3.1 TITLE TITLE DELETE **GRIFFIN. RANDY** 3.2 NAME NAME 1285 CAPITAL BLVD. 3.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32505 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE TITLE ገ _{Change} DELETE Addition DAVISON, LINDA 4.2 NAME NAME 1202 ALCANIZE ST. 4.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32503 CITY-ST-ZIP 4.4 CITY-ST-ZIP 51 TITLE TITLE DELETE NICKSON, CONNIE 5.2 NAME NAME 117 DIEGO CIRCLE 5.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32505 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE TITLE Change DELETE Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS ***61. 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), 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.