

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90044 047 ****61.25

DOCUMENT # 733167

1. Entity Name

FAITH PRAYER CENTER, INC.

Principal Place of Business

1282 CAPITAL BLVD
PENSACOLA FL 32505

Mailing Address

1281 CAPITOL BLVD.
PENSACOLA FL 32505-1107

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3024708

Applied For
Not

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERTRAND, FRANCES C
1281 CAPITAL BLVD
PENSACOLA FL 32505

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	V	☐ Delete
NAME	GRIFFIN, MARY	
STREET ADDRESS	1285 CAPITOL BLVD	
CITY-ST-ZIP	PENSACOLA FL 32505	
TITLE	S	☒ Delete
NAME	GREY, RUBY	
STREET ADDRESS	1283A CAPITAL BLVD.	
CITY-ST-ZIP	PENSACOLA FL 32505	
TITLE	D	☐ Delete
NAME	GRIFFIN, RANDY	
STREET ADDRESS	1285 CAPITAL BLVD.	
CITY-ST-ZIP	PENSACOLA FL 32505	
TITLE	D	☐ Delete
NAME	DAVISON, LINDA	
STREET ADDRESS	1202 ALCANIZE ST.	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	D	☐ Delete
NAME	NICKSON, CONNIE	
STREET ADDRESS	117 DIEGO CIRCLE	
CITY-ST-ZIP	PENSACOLA FL 32505	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change
NAME	Gray, Frank	
STREET ADDRESS	1283 A Capital Blvd	
CITY-ST-ZIP	Pensacola FL 32505	
TITLE		☒ Change
NAME	Gray, Ruby	
STREET ADDRESS	1283 A Capital Blvd	
CITY-ST-ZIP		
TITLE		☐ Change
NAME	Davison, Michael	
STREET ADDRESS	1202 N. Alcanize St	
CITY-ST-ZIP	Pensacola FL 32505	
TITLE		☐ Change
NAME	Davison, Bridget	
STREET ADDRESS	1202 N. Alcanize St	
CITY-ST-ZIP	Pensacola FL 32505	
TITLE		☐ Change
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-18-00