

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90044 039 ****70.00

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
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40017611



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01212005 Chg-NP CR2E037 (10/03)

City & State	City & State	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
KING, 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRIFFIN, MARY 1285 CAPITOL BLVD PENSACOLA, FL 32505 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRAY, RUBY 1283A CAPITAL BLVD. PENSACOLA, FL 32505 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFIN, RANDY 1285 CAPITAL BLVD. PENSACOLA, FL 32505 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVISON, LINDA 1202 ALCANIZE ST. PENSACOLA, FL 32503 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NICKSON, CONNIE 117 DIEGO CIRCLE PENSACOLA, FL 32505 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GRAY, FRANK 1283 A CAPITAL BLVD PENSACOLA, FL 32505 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 179 E Burgess Road Pensacola, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition Denise Couch 181 E. Burgess Road Pensacola, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition Connie Yarnado 177 E. Burgess Road Pensacola, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 179 E Burgess Road Pensacola, FL 32503

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: Frances C King 1/26/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #