

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

APPROVED

AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

1995 MAY -1 AM 7:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000001523 (9)

1. Corporation Name

PRAYER & PRAISE, INC.

300001432013
-05/17/95 -01147-024
****130.00 ****130.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
410 SIDNEY CIRCLE 410 SIDNEY CIRCLE
WINTER HAVEN FL 33880-1442 WINTER HAVEN FL 33880-1442

3. Date Incorporated or Qualified 03/25/1994
4. FEI Number 59-3214548
Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

5. Certificate of Status Desired A \$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. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
BENNETT, LAWRENCE
410 SIDNEY CIRCLE
WINTER HAVEN FL 33880-1442

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS
TITLE CP - D
NAME BENNETT, LAWRENCE
STREET ADDRESS 410 SIDNEY CIRCLE
CITY - ST - ZIP WINTER HAVEN FL 33880-1442
TITLE DS - D
NAME BENNETT, RITA
STREET ADDRESS 410 SIDNEY CIRCLE
CITY - ST - ZIP WINTER HAVEN FL 33880-1442
TITLE DT - D
NAME SLEEPE, LAWRIKA
STREET ADDRESS 4303 W. NORTH A, APT. 201
CITY - ST - ZIP TAMPA FL 33609
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 119.07(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

Lawrence M. Bennett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-21-95

Date

813-297-5093

Telephone #