

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 15, 2004
Secretary of State**

DOCUMENT# N00000007858

Entity Name: HOUSE OF PRAYER & PRAISE DELIVERANCE CENTER INC.

Current Principal Place of Business:

4949 SILVER STAR ROAD
ORLANDO, FL 32808

New Principal Place of Business:

6900 SILVER STAR ROAD
#211
ORLANDO, FL 32818

Current Mailing Address:

8519 WHITE RD.
ORLANDO, FL 32818

New Mailing Address:

FEI Number: 31-1740460 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KITSON, C. HORACE
8519 WHITE RD.
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KITSON, C. HORACE
Address: 8519 WHITE RD.
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: KITSON, LORNA M
Address: 8519 WHITE RD.
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: BARAUCH, SHANNON
Address: 1337 WILLOW CREST DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: BENNETT, KEITH
Address: 267 LAURENBURG LANE
City-St-Zip: OCOEE, FL 34761

Title: D () Delete
Name: MORRIS, HOWARD
Address: 1305 S. ATLANTIC AVE., APT.A
City-St-Zip: NEW SMYRNA, FL 32169

Title: D () Delete
Name: GARWOOD, CORNELIUS
Address: 4686 VARGAS ST.
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MORRIS, HOWARD L
Address: 2129 PALMETTO RD
City-St-Zip: MT. DORA, FL 32757

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C.HORACE KITSON

D

05/15/2004

Electronic Signature of Signing Officer or Director

_____ Date