

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001533

FILED
Apr 28, 2011
Secretary of State

Entity Name: AUDITORIUM OF PRAYER AND WORKSHIP INC

Current Principal Place of Business:

1821 ARMSTRONG BLVD
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

1821 ARMSTRONG BLVD
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 59-3697380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORTES, MILDRED
556 KILIMANJARO
KISSIMMEE, FL 34758 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
Name: CORTES, MILDRED REV
Address: 556 KILIMANJARO
City-St-Zip: KISSIMMEE, FL 34758

Title: PD
Name: CORTES JR., HECTOR M REV
Address: 556 KILIMANJARO
City-St-Zip: KISSIMMEE, FL 34758

Title: V
Name: GASPAR, LABANINO
Address: 1821 ARMSTRONG BLV
City-St-Zip: KISSIMMEE, FL 34741

Title: FD
Name: PEREZ, ANNETTE
Address: 1821 ARMSTRONG BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: S
Name: CORTES, NADINE
Address: 1821 ARMSTRONG BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: V
Name: CORTES, HECTOR M
Address: 1821 ARMSTRONG BLVD
City-St-Zip: KISSIMMEE, FL 34741

I hereby 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 all other like empowered.

SIGNATURE: MILDRED CORTES

D

04/28/2011

Electronic Signature of Signing Officer or Director

Date