

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005171

FILED
Jan 27, 2009
Secretary of State

Entity Name: OR YISRAEL INTERNATIONAL HOUSE OF PRAYER, INC.

Current Principal Place of Business:

713 PALMORE CT
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

713 PALMORE CT
LAKELAND, FL 33813 US

New Mailing Address:

FEI Number: 20-0974834 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, LINDA
713 PALMORE CT
LAKELAND, FL 33813 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: P () Delete
Name: MARCUM, GABRIELLA
Address: 5315-54 MONTEREY CIRCLE
City-St-Zip: DELRAY BEACH, FL 33410 US

Title: D () Delete
Name: REED, LINDA
Address: 713 PALMORE CT
City-St-Zip: LAKELAND, FL 33813 US

Title: D () Delete
Name: PREDOVICH, SHARON
Address: 16397 GLORY LANE
City-St-Zip: EDEN PRAIRIE, MN 55344 US

Title: D () Delete
Name: HARKEN, CHRIS
Address: 286 W EAGLE LAKE DRIVE
City-St-Zip: MAPLE GROVE, MN 55369 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARCUM, GABRIELLA
Address: 6225 UPLAND LANE NORTH
City-St-Zip: MAPLE GROVE, MN 55311 US

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

Title: D (X) Change () Addition
Name: VEGODA, DEVORAH
Address: 10807 WEST CLAIRMONT
City-St-Zip: TAMARAE, FL 33321 US

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

Title: D () Change (X) Addition
Name: JOHNSTON, ADELAIDE
Address: 190 TWIIGHT STREET
City-St-Zip: PALM BAY, FL 32907 US

Title: D () Change (X) Addition
Name: TOM, HARLOW
Address: 3761 SOUTH COQUINA COVE WAY # 106
City-St-Zip: PALM CITY, FL 34990 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GABRIELLA MARCUM

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date