

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39680

FILED
Apr 22, 2009
Secretary of State

Entity Name: THE ORIGINAL TABERNACLE OF PRAYER FOR ALL PEOPLE, INC.

Current Principal Place of Business:

163 W. 20TH ST.
RIVIERA BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10201
RIVIERA BEACH, FL 33419 US

New Mailing Address:

FEI Number: 65-0191415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OWENS, ROSA L
330 W 20TH ST
RIVIERA BEACH, FL 33404 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: WILLIAMS, HAYWOOD N
Address: 10821 NORTH MILITARY TRAIL #21D
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S () Delete
Name: OWENS, ROSA L
Address: 330 W. 20TH STREET
City-St-Zip: RIVIERA BCH., FL 33404

Title: T () Delete
Name: DECCICO, TRINEA N
Address: 4751 N. AUSTRALIAN AVE APT. 204
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: DECCICO, TRINEA N
Address: 3541 OLEANDER TERRACE
City-St-Zip: RIVIERA BEACH, FL 33404

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: ROSA L. OWENS

S

04/22/2009

Electronic Signature of Signing Officer or Director

Date