

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43434

FILED
Feb 11, 2008
Secretary of State

Entity Name: ORLANDO PRAYER AND WORSHIP CENTER - INTERNATIONAL INC.

Current Principal Place of Business:

400 N EDMON AVENUE
WINTER SPRINGS, FL 32708 US

New Principal Place of Business:

4710 ADANSON STREET
ORLANDO, FL 32804 US

Current Mailing Address:

P. O. BOX 623245
OVIEDO, FL 32762 US

New Mailing Address:

4710 ADANSON STREET
ORLANDO, FL 32804 US

FEI Number: 59-3067291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FUTCH, ROY G DR.
565 BENTLEY STREET
OVIEDO, FL 32765 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: DP () Delete
Name: FUTCH, ROY G DR
Address: 565 BENTLEY STREET
City-St-Zip: OVIEDO, FL 32765

Title: STD () Delete
Name: FUTCH, NAOMI E
Address: 565 BENTLEY STREET
City-St-Zip: OVIEDO, FL 32765

Title: VD () Delete
Name: STILES, LINDA R DR
Address: 14006 LAKE PARK DR
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: LANDRY, CHERYL L
Address: 115 LANGFORD DRIVE
City-St-Zip: CHULUOTA, FL 32766

Title: VD (X) Change () Addition
Name: FUTCH, NAOMI E
Address: 565 BENTLEY STREET
City-St-Zip: OVIEDO, FL 32765

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: DR. ROY G. FUTCH

DP

02/11/2008

Electronic Signature of Signing Officer or Director

Date