2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2009
Secretary of State

DOCUMENT# N98000005363

Entity Name: SOUL HARVEST WORD, WORSHIP AND PRAISE MINISTRIES, INC.

Current Principal Place of Business:

416 CYPRESS RD
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

416 CYPRESS RD
OCALA, FL 34472

New Mailing Address:

FEI Number: 59-3534670 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOLLINS- FORD, ESTELLA
9 BAHIA PLACE LOOP
OCALA, FL 34472 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: C ( ) Delete
Name: HOLLINS-FORD, ESTELLA
Address: 1118 N.W. 7TH AVE.
City-St-Zip: OCALA, FL 34474

Title: BM ( ) Delete
Name: WILSON, GLORIA
Address: 1118 N.W. 7TH AVE.
City-St-Zip: OCALA, FL 34474

Title: BM ( ) Delete
Name: WILLIAMS, MARVENETTE
Address: 17140 N.W. 24TH CT.
City-St-Zip: MIAMI, FL 33056

Title: BM ( ) Delete
Name: PALMER, DR. CORA LEE
Address: 2340 N.W. 184TH ST.
City-St-Zip: MIAMI, FL 33056

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:

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: ESTELLA FORD-HOLLINS C 05/22/2009

Electronic Signature of Signing Officer or Director — Date