2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008
Secretary of State

DOCUMENT# N99000003716

Entity Name: HIGHLY EXALTED PRAISE MINISTRIES, INC.

Current Principal Place of Business:

91 SERENITY LANE
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 238
QUINCY, FL 32353

New Mailing Address:

FEI Number: 59-3584210 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

COPELAND, ROSILYN
305 PONDEROSA CR.
MIDWAY, FL 32343 US

Name and Address of New Registered Agent:

WALKER, ROSILYN D
305 PONDEROSA CR.
MIDWAY, FL 32343 US

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: ROSILYN D. WALKER 05/27/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WALKER-COPELAND, ROSILYN
Address: 305 PONDEROSA CR.
City-St-Zip: MIDWAY, FL 32343

Title: T ( ) Delete
Name: JACKSON, KIMBERLY
Address: 52 HILLSIDE DR.
City-St-Zip: QUINCY, FL 32351

Title: T ( ) Delete
Name: WALKER, KEISHA
Address: 708 W. 2ND ST.
City-St-Zip: QUINCY, FL 32351

Title: ST ( ) Delete
Name: HENRY, PATSY
Address: 52 BUCKSKIN CIRCLE
City-St-Zip: MIDWAY, FL 32343

Title: V ( ) Delete
Name: GIBSON, LORRAINE
Address: 420 HAZEL GREEN RD
City-St-Zip: QUINCY, FL 32352

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: WALKER, ROSILYN D
Address: 305 PONDEROSA CR.
City-St-Zip: MIDWAY, FL 32343

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: ROSILYN D. WALKER DP 05/27/2008
Electronic Signature of Signing Officer or Director Date