

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

4/11

**FILED**  
**Apr 29, 2004 8:00 am**  
**Secretary of State**

04-16-2004 90026 016 \*\*\*\*61.25

<b>DOCUMENT # N03000000271</b> 1. Entity Name <b>GOD'S PRAISE FAITH &amp; DELIVERANCE MINISTRIES, INC.</b>					
Principal Place of Business <b>1509 1ST AVE. EAST PALMETTO FL 34221</b>		Mailing Address <b>1509 1ST AVE. EAST PALMETTO FL 34221</b>			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>57-1139608</b> <div style="float: right; border: 1px solid black; padding: 2px;">         Applied For Not Applicable       </div>	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CARTER, RICHELLE 132 10TH AVE. WEST BRADENTON FL 34205</b>				7. Name and Address of New Registered Agent Name <b>Patricia Smith</b> Street Address (P.O. Box Number is Not Acceptable) <b>1505 1st Ave East</b> City <b>Palmetto</b> FL Zip Code <b>34221</b>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Patricia Smith</i></u> DATE <b>4-7-04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, HENRY 1505 1ST AVE. EAST PALMETTO FL 34221	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARTER, REGGIE 132 10TH AVE WEST BRADENTON FL 34205	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Patricia Smith 1505 1st Ave East Palmetto, FLA. 34221 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SUTTON, JAMES 1311 17TH ST. CRT. EAST BRADENTON FL 34208	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Cleveland Rowe 2609 6th Ave East Palmetto FL 34221 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARTER, RICHELLE 132 10TH AVE. WEST BRADENTON FL 34205	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Laura Rowe 2609 6th Ave East Palmetto FL 34221 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, PATRICIA 1505 1ST AVE. EAST PALMETTO FL 34221	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Patricia Smith 1505 1st Ave East Palmetto FLA 34221 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Laura Rowe</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>4-7-04</b> Daytime Phone # <b>941-722-2254</b>	