2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009500

FILED Sep 10, 2011 Secretary of State

Entity Name: IMMOKALEE HOUSE OF PRAYER OF THE APOSTOLIC FAITH, INC.

Current Principal Place of Business: New Principal Place of Business:

162 PEERLESS STREET. LEHIGH ACRES,, FL 33974

Current Mailing Address: New Mailing Address:

P.O. BOX 2407 162 PEERLESS STREET. NAPLES, FL 34106 LEHIGH ACRES,, FL 33974

FEI Number: 84-1692338 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIGGINS, JUANITA C 162 PEERLESS STREET LEHIGH ACRES, FL 33974 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPT

Name: RIGGINS, JUANITA C
Address: 162 PEERLESS STREET
City-St-Zip: LEHIGH ACRES, FL 33974

Title: D

Name: RIGGINS, JESSE.
Address: 162 PEERLESS STREET
City-St-Zip: LEHIGH ACRES, FL 33974

Title: D

Name: HUGUES, EMMA L

Address: 698 RAILROAD AVENUE, APT. #2
City-St-Zip: MOORE HAVEN, FL 33471

Title: DM

Name: COHENS, ESTELLA Address: P.O. BOX 673

City-St-Zip: MOORE HAVEN, FL 33471

Title: SDD

Name: COHENS, BEAUTINE
Address: P.O. BOX 673

City-St-Zip: MOORE HAVEN, FL 33471

Title: [

Name: COHENS, LARRY Address: P.O. BOX 673

City-St-Zip: MOORE HAVEN, FL 33471

I hereby 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 all other like empowered.

SIGNATURE: JUANITA C. RIGGINS DPT 09/10/2011