# DOCUMENT# N1400002441 Entity Name: GOD'S HOUSE OF PRAYER, PRAISE, WORSHIP AND WORD CHURCH, INC. **Current Principal Place of Business:**

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

1649 3RD ST SW WINTER HAVEN, FL 33880

### **Current Mailing Address:**

P.O. BOX 7571 WINTER HAVEN, FL 33883-7571 US

## **FEI Number: APPLIED FOR**

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

ALLEN, SANDRA 1649 3RD ST SW WINTER HAVEN, FL 33880 US

FILED Aug 24, 2016 Secretary of State CC3924400773

Certificate of Status Desired: Yes

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

#### Detail ~ ~ ~ /m · .

Officer/Dire	ctor Detail :		
Title	PSTD	Title	D
Name	ALLEN, SANDRA	Name	ALLEN, CALVIN E
Address	P.O. BOX 7571	Address	1649 3RD ST SW
City-State-Zip:	WINTER HAVEN FL 33883-7571	City-State-Zip:	WINTER HAVEN FL 33880
Title	D	Title	D
Name	SHAW, TIFFANY N	Name	GRAYES, KAREN D
Address	1649 3RD ST SW	Address	1649 3RD ST SW
City-State-Zip:	WINTER HAVEN FL 33880	City-State-Zip:	WINTER HAVEN FL 33880
Title	D	Title	D
Title Name	D WRIGHT, KENNETH B	Title Name	D SHAW, CECIL G
			-
Name	WRIGHT, KENNETH B	Name	SHAW, CECIL G
Name Address	WRIGHT, KENNETH B 1649 3RD ST SW	Name Address	SHAW, CECIL G 1649 3RD ST SW
Name Address City-State-Zip:	WRIGHT, KENNETH B 1649 3RD ST SW WINTER HAVEN FL 33880	Name Address City-State-Zip:	SHAW, CECIL G 1649 3RD ST SW WINTER HAVEN FL 33880
Name Address City-State-Zip: Title	WRIGHT, KENNETH B 1649 3RD ST SW WINTER HAVEN FL 33880 D	Name Address City-State-Zip: Title	SHAW, CECIL G 1649 3RD ST SW WINTER HAVEN FL 33880 D
Name Address City-State-Zip: Title Name	WRIGHT, KENNETH B 1649 3RD ST SW WINTER HAVEN FL 33880 D GRAYES, BOBBY O	Name Address City-State-Zip: Title Name	SHAW, CECIL G 1649 3RD ST SW WINTER HAVEN FL 33880 D SMITH, GEORGE 1649 3RD ST SW

#### Continues on page 2

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	KENNETH WRIGHT	MINISTER	08/24/2016
			_

Electronic Signature of Signing Officer/Director Detail

Date

# **Officer/Director Detail Continued :**

Title D	Title	D
Name ALLEN, JOSHUA J	Name	ALLEN, CHRISTINA V
Address 1649 3RD ST SW	Address	1649 3RD ST SW
City-State-Zip: WINTER HAVEN FL 33880	City-State-Zip:	WINTER HAVEN FL 33880
Title D		

litte	D
Name	SMITH, WANDA
Address	1649 3RD ST SW
City-State-Zip:	WINTER HAVEN FL 33880