


FILE NOW: FILING FEE IS \$61.25

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Mar 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 711648 (6)
1. Corporation Name
THE EVANGELICAL HOUSE OF PRAYER, INC.

Principal Place of Business 3236 MCKETHAN ROAD DADE CITY FL 33525	Mailing Address 3236 MCKETHAN ROAD DADE CITY FL 33525 US
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3. Date Incorporated or Qualified 10/17/1966		
4. FEI Number 59-2959336	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

21. Principal Place of Business Church	2a. Mailing Address 3236 McKethan Rd		
22. Suite, Apt. #, etc. 3236 McKethan Rd	27. Suite, Apt. #, etc.		
23. City & State Dade City FL	28. City & State		
24. Zip 33525	25. Country FL	29. Zip 33525	30. Country FL

5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
**O'NEAL, ERVIN A.
5788 N. HIGHWAY 98
DADE CITY FL 33525**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P O'NEAL, ERVIN A. 5788 N. HIGHWAY 98 DADE CITY FL	1.1 TITLE	P- ERVIN A. O'Neal 3236 McKethan Rd. Dade City, FL 33525
NAME	O'NEAL, BETTY J. 5788 N. HIGHWAY 98 DADE CITY FL	1.2 NAME	Betty J. O'Neal 3236 McKethan Rd. Dade City FL 33525
STREET ADDRESS	RENAUD, BETSY K. P.O. BOX 153 LAKELAND FL	1.3 STREET ADDRESS	Betsy K. Renaud P.O. Box 491957 LEESBURG, FL 34749-1957
CITY-ST-ZIP	O'NEAL, TAMNAH 5000 S HIMES #536 TAMPA FL	1.4 CITY-ST-ZIP	SAME AS before
TITLE	D O'NEAL, DERRYL B. 36848 CHANCEY ROAD ZEPHYRHILLS FL	2.1 TITLE	D O'Neal, Derryl B 26336 Tappan Zee Dr Port Charlotte, FL 33952
NAME	HOLLAND, CINDY 36848 CHANCEY RD. ZEPHYRHILLS FL	2.2 NAME	D Kimberly A. Carroll 4058 Cantaro Ct Spring Hill, FL 34607
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	

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STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ *Rev. Ervin O'Neal*

CR2E037 (10/97)