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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711648

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



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

10/17/1966

4. FEI Number

59-2959336

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

5.00 May Be
Added to Fees

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
O'Neal, Ervin A.
82 Street Address (P.O. Box Number is Not Acceptable)
3236 Mckethan Rd.
83
84 City
Dade City FL 85 Zip Code
33525

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME O'NEAL, ERVIN A.
STREET ADDRESS 3236 MCKETHAN RD
CITY-ST-ZIP DADE CITY FL 33525
DELETE

TITLE VP
NAME O'NEAL, BETTY J.
STREET ADDRESS 3236 MCKETHAN RD
CITY-ST-ZIP DADE CITY FL 33525
DELETE

TITLE ST
NAME RENAUD, BETSY K.
STREET ADDRESS P.O. BOX 491957 N/A
CITY-ST-ZIP LEESBURG FL 34749
DELETE

TITLE D
NAME O'NEAL, TAMNAH
STREET ADDRESS 5000 S HIMES #536
CITY-ST-ZIP TAMPA FL
DELETE

TITLE D
NAME O'NEAL, DERRYL B.
STREET ADDRESS 20336 TAPPAN ZEE DR
CITY-ST-ZIP PORT CHARLOTTE FL 33952
DELETE

TITLE D
NAME CARROLL, KIMBERLY A
STREET ADDRESS 4058 CENTARO CT
CITY-ST-ZIP SPRING HILL FL 34607
DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
ST/D
O'Neal, Betsy K.
112 First Ct.
Palm Beach Gardens, FL 33410
Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
D
Carroll, Kimberly
1284 Seagate Dr., # 305
Palm Harbor, FL 34685
Change Addition

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, with all other like empowered.

SIGNATURE: Betsy K. Carroll
SIGNATURE REQUIRED
3/24/99 561-650-6271

CR2E037 (1/198)