

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712806

**FILED  
Apr 18, 2004  
Secretary of State**

**Entity Name:** THE FREE HOUSE OF PRAYER BY FAITH INC.

**Current Principal Place of Business:**

720 BRIARWOOD TERACE  
DAVIE, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

720 BRIARWOOD TERR  
DAVIE, FL 33325 US

**New Mailing Address:**

FEI Number: 65-0122567      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROWN, MAXINE J.  
720 BRIARWOOD TERRACE  
DAVIE, FL 33325 US

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

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: P      ( ) Delete  
Name: BROWN, MAXINE J  
Address: 720 BRIARWOOD TERR  
City-St-Zip: DAVIE, FL 33325

Title: D      ( ) Delete  
Name: BROWN, MCARTHUR  
Address: 720 BRIARWOOD TERRACE  
City-St-Zip: DAVIE, FL 33325

Title: D      ( ) Delete  
Name: BROWN, TANGELA C  
Address: 11079 NW 38TH PLACE  
City-St-Zip: SUNRISE, FL 33351

Title: D      ( ) Delete  
Name: BROWN, MCARTHUR II  
Address: 11079 NW 38TH PLACE  
City-St-Zip: SUNRISE, FL 33351

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MAXINE J. BROWN

P

04/18/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date