2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#714847

FILED Apr 07, 2009 Secretary of State

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

orrent P	Principal Place	OI DUSINESS:	New Princ	ipal Place of Business:
2445 N.W /IIAMI, FL	62ND STREET 33147	ī		
Current Mailing Address:		New Mailing Address:		
	92 STREET ORES, FL 331	38		
El Number	r: 59-6170398	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired (X)
lame and	d Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:
005 NE 9	, ALBERT 32 ST ORES, FL 331	38 US		
	e named entity s e of Florida.	submits this statement for the pu	irpose of changing i	ts registered office or registered agent, or both,
SIGNATU	RE:			
SIGNATU		ic Signature of Registered Ager	nt	Date
				Date IS/CHANGES TO OFFICERS AND DIRECTOR
	Electron	TORS: Delete ERT JR., REET		
OFFICER itle: lame: .ddress:	Electron S AND DIREC P/D () WATSON, ALBE 1005 NE 92 STI MIAMI SHORES	Delete ERT JR., REET 5, FL 33138 Delete	ADDITION Title: Name: Address:	IS/CHANGES TO OFFICERS AND DIRECTOR
DFFICER ittle: lame: .ddress: bity-St-Zip: ittle: lame: .ddress:	Electron S AND DIREC P/D () WATSON, ALBE 1005 NE 92 STI MIAMI SHORES V/D () CURRY, JAMES 2445 W. 62 ST MIAMI, FL 331	Delete ERT JR., REET S, FL 33138 Delete 47 Delete /ENDOLYN R	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	IS/CHANGES TO OFFICERS AND DIRECTOR
DFFICER itle: lame: .ddress: city-St-Zip: itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	Electron S AND DIREC P/D () WATSON, ALBE 1005 NE 92 STI MIAMI SHORES V/D () CURRY, JAMES 2445 W. 62 ST MIAMI, FL 331- STD () GOODSON, GV 2445 NW 62 ST MIAMI, FL 331-	Delete ERT JR., REET S, FL 33138 Delete 47 Delete /ENDOLYN R	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	() Change () Addition () Change () Addition () Change () Addition S/D (X) Change () Addition GOODSON, GWENDOLYN R 2445 NW 62 ST

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ALBERT WATSON JR P/D 04/07/2009