2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#717440

FILED Apr 30, 2008 Secretary of State

Entity Name: THE HOUSE OF PRAYER, INC.

		SOE OF TWO TER, IIVO.			
Current Principal Place of Business:			New Principal Place	of Business:	
7205 52NC PINELLAS) ST., N. PARK, FL 33	781			
Current Mailing Address:			New Mailing Address:		
3750 68 A\	/E. NB				
PINELLAS	PARK, FL 33	781			
FEI Number:	59-2399683	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
270 43 AV ST. PETER	named entity of Florida.	33703 US	ourpose of changing its registered	d office or registered agent, or both,	
	Electror	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S (BURKE, BETT) 3750-68TH AVI PINELLAS PAR	ENUE N.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T (SWAILS, DEBO 6322-33RD W/ ST PETERSBU	AY N.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BURKE, WILLI 3750 68 AVE N PINELLAS PAR	l	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SWAILS, TERF 6322 33 WAY) Delete RY SBURG, FL 33702	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BURKE, PAUL/ 270 43 AVE NE ST PETE, FL 3	<u> </u>	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BETTY BURKE S 04/30/2008