

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723697

FILED
Jan 10, 2009
Secretary of State

Entity Name: THE LORD IS MY SHEPARD - THE HOUSE OF PRAYER FOR ALL PEOPLE, INC

Current Principal Place of Business:

PRAYER FOR ALL PEOPLE INC
15101 TYLER STREET
RICHMOND HEIGHTS, FL 33176

New Principal Place of Business:

Current Mailing Address:

PRAYER FOR ALL PEOPLE INC
15101 TYLER STREET
RICHMOND HEIGHTS, FL 33176

New Mailing Address:

FEI Number: 59-1913546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, VELMA
15101 TYLER STREET
RICHMOND HIGHTS, FL 33176 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: WILLIAMS, VELMA,
Address: 15101 TYLER STREET
City-St-Zip: RICHMOND HGTS, FL

Title: DV () Delete
Name: ROLLE, THELMA,
Address: 930 NW 95 ST APT 312
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: JERNIGAN, MINNIE S.,
Address: 15100 POLK ST
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: WILLIAMS, LULA MAE
Address: 2826 MAYO ST
City-St-Zip: HOLLYWOOD, FL

Title: CD () Delete
Name: JERNIGAN, MINNIE
Address: 15100 POLK ST.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: WILLIAMS, SAMUEL D
Address: 15101 TYLER ST
City-St-Zip: MIAMI, FL

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
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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 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: MINNIE JERGENS

SD

01/10/2009

Electronic Signature of Signing Officer or Director

Date