

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727634

FILED  
Mar 05, 2012  
Secretary of State

**Entity Name:** INDEPENDENT HOUSE OF PRAYER OF ZELLWOOD, INC.

**Current Principal Place of Business:**

6416 WILLOW STREET  
ZELLWOOD, FL 32798

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1144  
ZELLWOOD, FL 32798

**New Mailing Address:**

**FEI Number:** 59-2267973

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BLACK, WILLIE S  
2368 PARTNERSHIP HILL DR  
APOPKA, FL 32712 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: BISH  
Name: BLACK, WILLIE S  
Address: 2368 PARTNERSHIP HILLS DR.  
City-St-Zip: APOPKA, FL 32712

Title: BISH  
Name: WILSON, COY  
Address: 7430 HOLLY ST.  
City-St-Zip: ZELLWOOD, FL 32798

Title: MOTH  
Name: SIRMAN, LUCY LEE  
Address: HOLLY ST.  
City-St-Zip: ZELLWOOD, FL 32798

Title: MIN  
Name: DAWSON, GWENDOLYN  
Address: 3679 MOHAWK DR.  
City-St-Zip: ZELLWOOD, FL 32798

Title: HM/S  
Name: HASTINGS, DEBORAH D  
Address: 410 WEST KEENE RD  
City-St-Zip: APOPKA, FL 32703 US

Title: FN/S  
Name: LOVE, QUANDRA M  
Address: 3887 KITTY HAWK AVE.  
City-St-Zip: ORLANDO, FL 32808 US

I hereby 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 all other like empowered.

SIGNATURE: WILLIE S. BLACK

BISH

03/05/2012

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

\_\_\_\_\_  
Date