## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # 737960

1. Entity Name



## **FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91377 044 \*\*\*\*61.25

THE HOU	SE OF PRAYER OF OCALA	INC.		)  ` <u>.</u>				
2502 N.W. 18TH STREET 2502		Mailing Address 2502 N.W. 18TH STREET OCALA FL 34475	2502 N.W. 18TH STREET			-		
2. Principal F	Place of Business	3. Mailing Address						
			Cuito Apt # etc		سرف			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			HECK HERE IF MAI	KING CHANGES		
City & State		City & State	City & State		1762313		oplied For ot Applicable	
Zip	Country	Zip	Country	5. Certificate of State	us Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent	Nome	7. Name and Addre	ss of New Registe	red Agent		
SAMUEL, EVANG. G.L.								
	V. 18TH STREET		Street Address	(P.O. Box Number is No	مستعر (t Acceptable			
OCALA F	L 34475				مر			
			- City			FL Zip Cod	e	
	named entity submits this statement fo	or the purpose of changing its re	egistered office or registe	ered agent, or both, in th	e State of Florida. I	am familiar with,	and accept	
the obligat	tions of registered agent.							
SIGNATURE:								
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature require	ed when reinstating)	D	ATE		
FILE NOW: FEE IS \$61.25			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
•	FILE NOW: FEE IS \$61.25		· · · ·	\$5.00 May Be Added to Fees		-		
10.	FILE NOW: FEE IS \$61.25  OFFICERS AND DI	Trust Fund Co	· · · ·	\$5.00 May Be Added to Fees	Florida De	partment of S	State	
- <b>\$</b> :	OFFICERS AND DI	Trust Fund Co	ntribution.	Added to Fees	Florida De	partment of S	State	
10. TITLE NAME	OFFICERS AND DIE	Trust Fund Co	11.  TITLE  NAME	Added to Fees	Florida De	D DIRECTORS IN	State I 10	
10.	OFFICERS AND DI P SAMUEL, EVANG. G.L. 2502 N.W. 18TH STREET	Trust Fund Co	11.	Added to Fees	Florida De	D DIRECTORS IN	State I 10	
10. TITLE NAME STREET ADDRESS	OFFICERS AND DI P SAMUEL, EVANG. G.L. 2502 N.W. 18TH STREET OCALA FL 34475	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida De	D DIRECTORS IN	State I 10	
110.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS AND DII P SAMUEL, EVANG. G.L. 2502 N.W. 18TH STREET OCALA FL 34475 V JOHNSON, SHAWN J	Trust Fund Col	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Added to Fees	Florida De	D DIRECTORS IN Change	State  I 10  Addition	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

4-24-03