

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 09, 2007 8:00 am
Secretary of State

05-09-2007 90104 047 ****61.25

DOCUMENT # 746851

1. Entity Name
PRAISE CATHEDRAL OF TALLAHASSEE, INC.



Principal Place of Business
**3206 CAPITAL CIR., NW
TALLAHASSEE, FL 32303 US**

Mailing Address
**3206 CAPITAL CIR. NW
TALLAHASSEE, FL 32303 US**

DO NOT WRITE IN THIS SPACE



04232007 No Chg-NP CR2E037 (4/06)

4. FEI Number
41-0220608

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CLEMMONS, SUSAN
7076 BUCK SKIN ROAD
TALLAHASSEE, FL 32308**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Susan Clemmons*
Susan Clemmons

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME CLEMMONS, JOSEPH
STREET ADDRESS 7076 BUCK SKIN ROAD
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE BOD
NAME GORDON, HERB
STREET ADDRESS 2308 GERI ANN LANE
CITY-ST-ZIP TALLAHASSEE, FL 32303

TITLE BOD
NAME HILL, ALBERT
STREET ADDRESS ~~5319 TALLAPOOSA ROAD~~
CITY-ST-ZIP ~~TALLAHASSEE, FL 32303~~

Delete

TITLE BOD
NAME WHEELER, DANCEY DANYEL
STREET ADDRESS 3705 AKARSON DR., APT A
CITY-ST-ZIP TALLAHASSEE, FL 32311

TITLE BOD
NAME GLEATON, MIKE
STREET ADDRESS 403 MCKEITHAN ST
CITY-ST-ZIP TALLAHASSEE, FL 32304

TITLE BOD
NAME FRAZIER, SHIRLEY
STREET ADDRESS 9521 SCOTTSDALE ROAD
CITY-ST-ZIP TALLAHASSEE, FL 32305

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: *Rev. Joseph E. Clemmons* **Joseph E. Clemmons**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-07
Date

850-562-3018
Daytime Phone