

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752404

FILED
Jan 14, 2009
Secretary of State

Entity Name: HIGHEST PRAISE FAMILY CHURCH, INC.

Current Principal Place of Business:

1350 E. LAKE ROAD, N.
TARPON SPRINGS, FL 34688

New Principal Place of Business:

Current Mailing Address:

1350 E. LAKE ROAD, N.
TARPON SPRINGS, FL 34688

New Mailing Address:

FEI Number: 59-2002993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIPPIN, ROY K
7240 AUBURN LN.
NEW PORT RICHEY, FL 34654 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: PT () Delete
Name: PIPPIN, ROY K
Address: 7240 AUBURN LN
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VPT () Delete
Name: COOK, TOM
Address: 3506 OXFORD DR.
City-St-Zip: HOLIDAY, FL 34691

Title: T () Delete
Name: BERRY, RUSS
Address: 3236 BEACON SQUARE DR.
City-St-Zip: HOLIDAY, FL 34691

Title: S () Delete
Name: NIEVES, JOSEPH
Address: 665 DEER RUN N
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPT (X) Change () Addition
Name: GLASS, MIKE
Address: 7136 ARBORETUM WAY
City-St-Zip: NEW PORT RICHEY, FL 34655

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: ROY K PIPPIN

PT

01/14/2009

Electronic Signature of Signing Officer or Director

Date