

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90022 012 ****61.25

DOCUMENT # 758231

1. Entity Name

PRAYER CHAINERS MISSION OF GOD, INC.



Principal Place of Business

PRAYERS CHAINERS MISSION
19455 SE MCDANIEL RD
BLOUNTSTOWN FL 32424
US

Mailing Address

P O BOX 623
P.O. BOX 623
BLOUNTSTOWN FL 32424
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

05-0079001

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHEARD, GERALDINE B
19569 SHEARD'S RD
BLOUNTSTOWN FL 32424

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Geraldine B Sheard

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

Jan 30, 2008

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME SHEARD, GERALDINE B ☐ Delete
STREET ADDRESS 19569 SE 3 SHEARDS ROAD
CITY-ST-ZIP BLOUNTSTOWN FL 32424

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ASD
NAME PETERSON, DEBRA ☐ Delete
STREET ADDRESS 20806 DAVIS CIRCLE
CITY-ST-ZIP BLOUNTSTOWN FL 32424

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AD
NAME DAVIS, RUBY ☐ Delete
STREET ADDRESS 10877 SE HWY 69
CITY-ST-ZIP BLOUNTSTOWN FL 32424

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME PETERSON, MARJORIE A ☐ Delete
STREET ADDRESS 19503 SE SHEARDS RD
CITY-ST-ZIP BLOUNTSTOWN FL 32424

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME ABNER JONES, DEBRA K ☐ Delete
STREET ADDRESS 19503 SE DAVIS RD
CITY-ST-ZIP BLOUNTSTOWN FL 32424

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME CARROLL, ANNETTE ☒ Delete
STREET ADDRESS RTE 3 BOX 286G
CITY-ST-ZIP BRISTOL FL 32351

TITLE ☒ Change ☐ Addition
NAME Battle, Tarsha J. M.
STREET ADDRESS 20748 SE Sherry Av
CITY-ST-ZIP Blountstown FL 32424

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Geraldine B Sheard* (Geraldine B Sheard) Jan 30, 08 - 1850-674-8683