

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2008 8:00 am
Secretary of State

05-08-2008 90022 049 ****68.00

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1. Entity Name

THE HOUSE OF PRAYER PENTECOSTAL HOLINESS,
INC.



Principal Place of Business

506 NORTH 1ST STREET
LAKE WALES, FL 33853

Mailing Address

P.O. BOX 1436
LAKE WALES, FL 33859

41



03272008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number

59-2363612

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PITTMAN, EDWARD
4224 CARILLON CT
LAKE WALES, FL 33853

**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

Pastor Edward Pittman, Edward Pittman

4-15-08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PITTMAN, EDWARD PASTOR
STREET ADDRESS	1007 STATE RD 60 EAST
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	T
NAME	MOSE, ANDREA
STREET ADDRESS	805 WHSPER LAKE COURT
CITY-ST-ZIP	WINTER HAVEN, FL 33881
TITLE	D
NAME	PETERSON, FLORIA P
STREET ADDRESS	2970 E TROT TRAIL
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	D
NAME	PITTMAN, LONNIE
STREET ADDRESS	318 MOBLEY AVE
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	T
NAME	PITTMAN, EDWARD
STREET ADDRESS	220 GRANT ST
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	T
NAME	LEEKES, KATHERINE
STREET ADDRESS	1426 LAKE VIEW
CITY-ST-ZIP	LAKE WALES, FL 33853

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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:

Pastor Edward Pittman, Pastor Edward Pittman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #