

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Monahan
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
55 MAR 27 AM 10:52

DOCUMENT # 770301 (0)
1. Corporation Name
CRUSADE FOR JESUS HOUSE OF PRAYER, INCORPORATED

Principal Place of Business Mailing Address
LOIS DAVIS **LOIS DAVIS**
 3313 WEST CHURCH STREET 3313 WEST CHURCH STREET
 ORLANDO FL 32805 ORLANDO FL 32805

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **09/20/1983** 3a. Date of Last Report **04/14/1994**
 4. FEI Number **59-2468541** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75** Supplemental Fee Not Required
 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 21 built, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip 28 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent
GAINES, S. T. (ASST. PASTOR)
2198 PATTERSON STREET
ORLANDO FL 32811

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, latest or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-designating) DATE

12. OFFICERS AND DIRECTORS
 TITLE NAME STREET ADDRESS CITY - ST - ZIP
 PD **DAVIS, LOIS (PASTOR)**
3313 WEST CHURCH STREET
ORLANDO FL
 TD **YOUNG, LUELLA**
5501 ELEASE ST.
ORLANDO FL
 DS **CRUME, CHARLENE G.**
5433 LESCOT LANE
ORLANDO FL
 D **THOMAS, JANIE L.**
5297 LETHA ST.
ORLANDO FL
 D **YOUNGS, ELEGAR**
5501 ELEASE STREET
ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 11 TITLE Change Addition
 12 NAME
 13 STREET ADDRESS
 14 CITY - ST - ZIP
 21 TITLE Change Addition
 22 NAME
 23 STREET ADDRESS
 24 CITY - ST - ZIP
 31 TITLE Change Addition
 32 NAME
 33 STREET ADDRESS
 34 CITY - ST - ZIP
 41 TITLE Change Addition
 42 NAME
 43 STREET ADDRESS
 44 CITY - ST - ZIP
 51 TITLE Change Addition
 52 NAME
 53 STREET ADDRESS
 54 CITY - ST - ZIP
 61 TITLE Change Addition
 62 NAME
 63 STREET ADDRESS
 64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Pastor Lois Davis*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-95
 Date (Type in Block 8)