2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008
Secretary of State

DOCUMENT# F96000000838

Entity Name: GOOD SHEPHERD UNITED HOUSE OF PRAYER MINISTRIES, INCORPORATED

Current Principal Place of Business:

417 PINEDA STREET
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

417 PINEDA STREET
COCOA, FL 32922

New Mailing Address:

FEI Number: 59-3368300 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PHILLIPS, DAVID L SR
1220 HENDRY AVENUE
COCOA, FL 32922 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: CD ( ) Delete
Name: PHILLIPS, DAVID L SR
Address: 1220 HENDRY AVENUE
City-St-Zip: COCOA, FL 32922

Title: VCD ( ) Delete
Name: PHILLIPS, LEKANJALA D
Address: 1220 HENDRY AVENUE
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete
Name: PHILLIPS, DELICIA L
Address: 1220 HENDRY AVENUYE
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete
Name: PHILLIPS, DAVID L JR
Address: 1220 HENDRY AVENUE
City-St-Zip: COCOA, FL 32922

Title: D (X) Delete
Name: LUCKY, CASSANDRA M
Address: 4560 ELENA WAY
City-St-Zip: MELBOURNE, FL 32934

Title: D (X) Delete
Name: GRANT, ANNASTACIA
Address: 7273 JUPITER BLVD.
City-St-Zip: PALM BAY, FL 32908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: LUCKY, CASSANDRA M
Address: 4560 ELENA WAY
City-St-Zip: MELBOURNE, FL 32934

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

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: DAVID L. PHILLIPS SR. PRES 02/04/2008

Electronic Signature of Signing Officer or Director — Date