9/21/01-90005-001-$150.00-$150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000000479

FILED
01 OCT -8 AM 8:47
C00077250
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. Entity Name

PREFECTING PRAISE MINISTIRES, INC

Principal Place of Business	Mailing Address
	1801 E COLONIAL DR 3107 ORLANDO, FL 32803

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
38 SOUTH HASTINGS STREET	1801 E COLONIAL DR
Suite, Apt. #, etc.	Suite, Apt. #, etc. 107
City & State ORLANDO, FL	City & State ORLANDO, FL
Zip / Country 32803 / US	Zip / Country 32803 / US

4. FEI Number: 59-3616671 ☐ 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
ROBERT S. BAXTER SR. 7462 BORDWINE DR ORLANDO, FL 32818	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.

SIGNATURE: Robert S. Baxter SR. ROBERT S. BAXTER SR 5/29/
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) X	FILE NOW!!! FEE IS $150.00 After MAY 1, 2001 Fee will be $550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME STREET ADDRESS CITY - ST - ZIP	PASTOR ROBERT S. BAXTER 7462 BORDWINE DRIVE ORLANDO, FL 32818 ☐ Delete	TITLE T NAME STREET ADDRESS CITY - ST - ZIP	ELDER ELDER TORREY WALTHOUR 1622 WILLIE MAYS PKWY ORLANDO, FL 32811 ☐ Change X Addition
TITLE D NAME STREET ADDRESS CITY - ST - ZIP	PASTOR GRACE BAXTER 7462 BORDWINE WINE DRIVE ORLANDO, FL 32818 ☐ Delete	TITLE T NAME STREET ADDRESS CITY - ST - ZIP	MINISTER ANDRAY BROOKS SR 7110 KENSINGTON HIGH BLVD ORLANDO, FL 32818 ☐ Change X Addition
TITLE D NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY SYLVIA ALLEN 936 HARRISON AVE S.W. CANTON, OHIO 44706 X Delete	TITLE T NAME STREET ADDRESS CITY - ST - ZIP	MEMBER VALERIE WATKINS 6715 GIANT OAK LANE #246 ORLANDO, FL 32810 ☐ Change X Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert S. Baxter SR. ROBERT S. BAXTER SR 5/29/2001 (407) 523-0484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #