

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005465

FILED
Sep 06, 2007
Secretary of State

Entity Name: GATES OF PRAYER, INC.

Current Principal Place of Business:

10142 ARROWHEAD DR.
#1
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

1526 UNIVERSITY BLVD. W
#424
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-3663576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAPLAN, NANCY E
10142 ARROWHEAD DR.
#1
JACKSONVILLE, FL 32257 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: PTD () Delete
Name: KAPLAN, NANCY
Address: 10142 ARROWHEAD DR. #1
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPD () Delete
Name: COLEMAN, ALLEN
Address: 13291 VANTAGE WAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD () Delete
Name: PITTMAN, VANILLA
Address: 8829 S FALCON TRACE DR.
City-St-Zip: JACKSONVILLE, FL 32222

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KAPLAN, NANCY
Address: 10142 ARROWHEAD DR. #1
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP (X) Change () Addition
Name: SARTOR, SYLVIA
Address: 4219 BUCKSKIN LAKE DR.
City-St-Zip: ELLICOTT CITY, MD 21042

Title: SEC (X) Change () Addition
Name: CARNEGIE, ANGELA
Address: 610 CITRUS CT.
City-St-Zip: MELBOURNE BEACH, FL 32951

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: NANCY KAPLAN

PRES

09/06/2007

Electronic Signature of Signing Officer or Director

Date