

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005786

FILED
Mar 20, 2009
Secretary of State

Entity Name: WORD AND PRAISE FAMILY CHURCH, INC.

Current Principal Place of Business:

1128 D BEVILLE ROAD
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 10894
DAYTONA BEACH, FL 32120

New Mailing Address:

FEI Number: 59-3653208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FUQUA, MURIEL
412 ALEATHA DRIVE
DAYTONA BEACH, FL 32114 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: P () Delete
Name: FUQUA, MURIEL
Address: 412 ALEATHA DRIVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP () Delete
Name: FUQUA, DANNY
Address: 412 ALEATHA DR.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: STD () Delete
Name: ROBINSON, ESSINA
Address: 1209 PEACHTREE RD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: VONDA, MCCASKELL
Address: 907 AVERY STREET
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: SMITH, JOSIE
Address: 128 NORMA DR. #114
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MURIEL FUQUA

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date