

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00472

FILED
Jul 08, 2010
Secretary of State

Entity Name: PRAYER & HEALING TEMPLE INC.

Current Principal Place of Business:

409 3RD STREET S.E.
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

409 3RD STREET S.E.
HAVANA, FL 32333

New Mailing Address:

FEI Number: 59-2364224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, CHRISTINE D
409 3RD ST. SE
HAVANA, FL 32333 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: D
Name: ROBINSON, JIM R
Address: 409 SE 3 ST
City-St-Zip: HAVANA, FL

Title: EVD
Name: ROBINSON, CHRISTINE
Address: 409 3RD ST. S.E.
City-St-Zip: HAVANA, FL

Title: D
Name: HARDY, JIMMY
Address: RT 2 BOX 123-C
City-St-Zip: QUINCY, FL

Title: D
Name: ROBINSON, JACQUELINE SIS
Address: 409 3RD ST. S.E.
City-St-Zip: HAVANA, FL

Title: D
Name: HERMON, MAE HELEN REV
Address: RT 2 BOX 123-C
City-St-Zip: QUINCY, FL

Title: REV
Name: ROBINSON, CHRISTINE EVD
Address: 409 3RD ST SE
City-St-Zip: HAVANA, FL

I hereby 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 all other like empowered.

SIGNATURE: JIM R ROBINSON

D

07/08/2010

Electronic Signature of Signing Officer or Director

Date