

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004534

FILED  
May 03, 2005  
Secretary of State

**Entity Name:** FAITH EVANGELISTIC PRAISE AND WORSHIP CENTER, INC.

**Current Principal Place of Business:**

7770 NW 23RD AVE.  
104  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

3011 N.W. 183 STREET  
OPA LOCKA, FL 33056

**New Mailing Address:**

FEI Number: 65-1109589      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

JONES, DAISY  
3011 N.W. 183 STREET  
OPA LOCKA, FL 33056      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: PD      ( ) Delete  
Name: JONES, DAISY  
Address: 3011 N.W. 183 STREET  
City-St-Zip: MIAMI, FL 33056

Title: SD      ( ) Delete  
Name: JONES-THOMPSON, WILLIE M  
Address: 3117 NW 204 LANE  
City-St-Zip: MIAMI, FL 33056

Title: TD      ( ) Delete  
Name: THOMPSON, NATHANIEL  
Address: 3117 NW 204 LANE  
City-St-Zip: MIAMI, FL 33056

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIE MAE JONES-THOMPSON

SD

05/03/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date