

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007267

FILED
Jul 02, 2004
Secretary of State

Entity Name: PRIESTLY PRAISE MINISTRIES INC.

Current Principal Place of Business:

4345 COOL EMERALD DR.
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

4345 COOL EMERALD DR.
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3749453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, DEBORAH
1111 MERCER DRIVE
TALLAHASSEE, FL 32303 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: C () Delete
Name: LYONS, LEE A
Address: 4345 COOL EMERALD DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: LYONS, PRISCILLA L
Address: 4345 COOL EMERALD DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: ST () Delete
Name: ROBINSON, DEBORAH L
Address: 1111 MERCER DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: COLLINS, EMANUEL
Address: 315 SKATE DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: GRANTHAM, CELESTINE
Address: 2437 LANRELL DR.
City-St-Zip: TALLAHASSEE, FL 32303

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 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: LEE A. LYONS

C

07/02/2004

Electronic Signature of Signing Officer or Director

Date