## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000007959

FILED May 06, 2009 Secretary of State

Entity Name: OUR FATHER'S HOUSE OF PRAYER MINISTRIES CHURCH, INC.

Current P	rincipal Place of Business:	New Prince	ipal Place o	of Business:	
13230 NW 7TH AVE MIAMI, FL 33168			17401 NW 2ND AVENUE MIAMI GARDENS, FL 33169		
Current Mailing Address:		New Maili	New Mailing Address:		
13230 NW 7TH AVE MIAMI, FL 33168			17401 NW 2ND AVENUE MIAMI GARDENS, FL 33169		
n accordan	:: 65-1151100 FEI Number Applied For ( ) FI nce with s. 607.193(2)(b), F.S., the corporation did not rec d Address of Current Registered Agent:	=	e.	Certificate of Status Desired (X)  F New Registered Agent:	
	MINE AVENUE 2, FL 33023 US				
	e named entity submits this statement for the purpo e of Florida.	ose of changing i	ts registered	I office or registered agent, or both	
	e of Florida. RE:	ose of changing i	ts registered		
n the State	e of Florida.  RE:  Electronic Signature of Registered Agent			Date	
n the State	e of Florida. RE:				
n the State	e of Florida.  RE:  Electronic Signature of Registered Agent		S/CHANGE	Date	
n the State  SIGNATUI  DFFICER  Title:  Jame:  Address:	e of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete RUSSELL, STEPHANIE 3814 SW 68TH AVE	ADDITION Title: Name: Address:	S/CHANGE	Date S TO OFFICERS AND DIRECTO	
n the State BIGNATUI  DFFICER Title: lame: laddress: City-St-Zip: Title: lame: lame: laddress:	e of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete RUSSELL, STEPHANIE 3814 SW 68TH AVE MIRAMAR, FL 33023  TD () Delete LESTER, PATRICIA 3195 FOXCROFT RD F-206	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	S/CHANGE	Date STO OFFICERS AND DIRECTO ( ) Change ( ) Addition	

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: PATRICIA LESTER TD 05/06/2009