


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N02000000455</b>	
1. Entity Name TEMPLE OF PRAISE MINISTRIES, INC.	

Principal Place of Business 1417 SADLER RD., STE. 142 FERNANDINA BEACH, FL 32034	Mailing Address 1417 SADLER RD., STE. 142 FERNANDINA BEACH, FL 32034
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04052008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 03-0415493	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MICHAEL, DAVID L  
1417 SADLER RD., STE. 142  
FERNANDINA BEACH, FL 32034

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MICHAEL, DAVID L 159 CANDLER SCHOOL RD. CANDLER, NC 28715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ACOSTA, LINA M 86178 MELISSA RD. YULEE, FL 32097
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MICHAEL, JACQUELINE A 159 CANDLER SCHOOL RD. CANDLER, NC 28715
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04/25/08-80073-001 61.25

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** David L. Michael, President 4/10/08 (828) 670-9880  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #