

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003524

FILED  
Mar 18, 2008  
Secretary of State

**Entity Name:** HIGHER PRAISE FULL GOSPEL MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

2997 SIMPSON DR  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

2997 SIMPSON DR  
BARTOW, FL 33830

**New Mailing Address:**

**FEI Number:** 82-0547022

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MACGREGOR, JOHN H  
5116 S LAKELAND DR  
LAKELAND, FL 33813 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: P ( ) Delete  
Name: BOYD, JOHN F BISHOP  
Address: 2997 SIMPSON DR  
City-St-Zip: BARTOW, FL 33830

Title: VP ( ) Delete  
Name: BEAUFORD, MARIA REV  
Address: 2997 SIMPSON DR  
City-St-Zip: BARTOW, FL 33830

Title: D ( ) Delete  
Name: KNIGHT, LILLIAN REV  
Address: 2997 SIMPSON DR  
City-St-Zip: BARTOW, FL 33830

Title: T ( ) Delete  
Name: TURCO, VINCENT  
Address: 2997 SIMPSON DR  
City-St-Zip: BARTOW, FL 33830

Title: S ( ) Delete  
Name: GARDIN, LAURA A  
Address: 2997 SIMPSON DR  
City-St-Zip: BARTOW, FL 33830

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: BEAUFORD, MARIA REV  
Address: 1073 NORTH PLATTE WAY  
City-St-Zip: KISSIMMEE, FL 34759

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 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: MARIA D. BEAUFORD

VP

03/18/2008

Electronic Signature of Signing Officer or Director

Date