2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N02432

Entity Name: PRAISE 95, INC.

Current Principal Place of Business:

2070 N PALA FOX
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

2070 N PALA FOX
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 59-2433244 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLINTER, MICHAEL B
2070 N. PAIA FOX
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

GLINTER, MICHAEL B
2299 SCENIC HWY
UNIT B3
PENSACOLA, FL 32501 US

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: MICHAEL B. GLINTER 03/31/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GLINTER, MICHAEL B
Address: 2212 INVERNESS DR.
City-St-Zip: PENSACOLA, FL 32503

Title: SVPD ( ) Delete
Name: GLINTER, DARA L
Address: 2212 INVERNESS DR.
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete
Name: FRANKLIN, JOHN
Address: 3320 SISKEY PKWY, STE. 102
City-St-Zip: MATTHEWS, NC 28105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GLINTER, MICHAEL B
Address: 2299 SCENIC HWY, UNIT B3
City-St-Zip: PENSACOLA, FL 32503

Title: SVPD (X) Change ( ) Addition
Name: GLINTER, DARA L
Address: 2299 SCENIC HWY, UNIT B3
City-St-Zip: PENSACOLA, FL 32503

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: MICHAEL B. GLINTER PRES 03/31/2009
Electronic Signature of Signing Officer or Director Date