

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91231 049 ****61.25

DOCUMENT # N03000001109

1. Entity Name
PROSPEROUS LIFE CATHEDRAL, INC.



Principal Place of Business
**7825 NECTAR DR.
ORLANDO, FL 32819**

Mailing Address
**P.O BOX: 721786
ORLANDO, FL 32872**



2. Principal Place of Business

RDV SPORTS PLEX

3. Mailing Address

Suite, Apt., #, etc.

8701 MAITLAND SUMMIT BLVD.

Suite, Apt., #, etc.

05012004

Chg-NP

CR2E037 (10/03)

City & State

MAITLAND FLORIDA

City & State

4. FEI Number

59-3546423

Applied For

Not Applicable

Zip

32810

Country

U.S.

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JOHNSON, DARRELL A
5996 BENT PINE DR.
APT# 3303
ORLANDO, FL 32822**

7. Name and Address of New Registered Agent

Name

DARRELL A. JOHNSON

Street Address (P.O. Box Number is Not Acceptable)

4355 PERKINS AVE LANE #102

City

ORLANDO

FL

Zip Code

32822

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

DARRELL A. JOHNSON

APRIL 30, 2004

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete
**JOHNSON, DARRELL A
5996 BENT PINE DR., APT#3303
ORLANDO, FL 32822**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete
**VP
JOHNSON, JOHN
2804 RIO LANE
ORLANDO, FL 32805**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete
**S
YOUNG, JASON
1700 26TH STREET
ORLANDO, FL 32805**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Delete
**T
JOHNSON, MYRA
7825 NECTAR DR.
ORLANDO, FL 32819**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition
**T
BARBARA MORGAN
2804 RIO LANE
ORLANDO, FL 32805**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

DARRELL A. JOHNSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APRIL 30, 2004 407595-2255