

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003721

FILED
May 21, 2008
Secretary of State

Entity Name: HOUSE OF PRAYER WORSHIP CENTER, INC.

Current Principal Place of Business:

763 WEST BOULEVARD
CHIPLEY, FL 32428

New Principal Place of Business:

Current Mailing Address:

763 WEST BOULEVARD
CHIPLEY, FL 32428

New Mailing Address:

FEI Number: 05-0568952 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MCKINNIE, ANTHONY
1451 JOE NEEL RD.
CHIPLEY, FL 32428 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCKINNIE, ANTHONY
Address: 1451 JOE NEEL RD
City-St-Zip: CHIPLEY, FL 32428

Title: D () Delete
Name: MCGHEE, DEBRA
Address: 1510 SHACLEFORD RD
City-St-Zip: CHIPLEY, FL 32428

Title: D () Delete
Name: FINNEY, ALFRED
Address: 563 BENNETT DR
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCKINNIE, ANTHONY
Address: 1451 JOE NEEL RD
City-St-Zip: CHIPLEY, FL 32428

Title: D (X) Change () Addition
Name: MCGHEE, DEBRA
Address: 1510 SHACKELFORD RD
City-St-Zip: CHIPLEY, FL 32428

Title: D (X) Change () Addition
Name: FINNEY, ALFRED
Address: 562 BENNETT DR
City-St-Zip: CHIPLEY, FL 32428

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: ANTHONY B MCKINNIE

RA

05/21/2008

Electronic Signature of Signing Officer or Director

Date