

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005261

FILED
Apr 10, 2009
Secretary of State

Entity Name: PRAISE, PRAYER, POWER DELIVERANCE MINISTRY INC

Current Principal Place of Business:

3039 SABAL PALM DRIVE
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

3039 SABAL PALM DRIVE
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 41-2100283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KING, BRENDA A
3039 SABAL PALM DRIVE
JACKSONVILLE, FL 32277 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: KING, BRENDA
Address: 3039 SABAL PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP () Delete
Name: SAMUELS, DEANNA
Address: 3800 SWEETBRIAR DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: S () Delete
Name: CODING, DEBORAH A
Address: 7011 MAYAPPLE RD
City-St-Zip: JACKSONVILLE, FL 32211

Title: TAS () Delete
Name: PATTERSON, ANDREA D
Address: 7147 ALDERMAN ROAD
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: SAMUELS, KENDALL
Address: 3800 SWEETBRIAR DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: CEO () Delete
Name: WILSON, REV RAYMOND DR
Address: P.O. BOX 824
City-St-Zip: SHARON, PA 16146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: THOMAS, JUDY
Address: 533 WEST 18TH STREET
City-St-Zip: JACKSONVILLE, FL 32206 US

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: BRENDA A. KING

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date