

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000763

FILED
Jan 09, 2006
Secretary of State

Entity Name: FULL GOSPEL PRAISE AND WORSHIP CENTER MINISTRIES, INC.

Current Principal Place of Business:

642 - 646 N. DIXIE HWY.
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

642 - 646 N. DIXIE HWY.
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILLIAMS, LAURNA
5962 NW 25 CT
SUNRISE, FL 33313 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: LISCOMBE, GEDION REV.
Address: 642 - 646 N. DIXIE HWY.
City-St-Zip: HOLLYWOOD, FL 33020

Title: VPS () Delete
Name: LISCOMBE, SHERRIE P
Address: 642 - 646 N. DIXIE HWY.
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SHERRIE POITIER-LISCOMBE

VPS

01/09/2006

Electronic Signature of Signing Officer or Director

Date