

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001088

FILED
Jan 22, 2009
Secretary of State

Entity Name: PASTORS PRAYER GATHERING, INC.

Current Principal Place of Business:

2121 KENILWORTH AVE
SOUTH DAYTONA, FL 32119

New Principal Place of Business:

Current Mailing Address:

2121 KENILWORTH AVE
SOUTH DAYTONA, FL 32119

New Mailing Address:

FEI Number: 05-0596454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, BOBBY
2121 KENILWORTH AVENUE
SOUTH DAYTONA, FL 32119 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: D () Delete
Name: SMITH, BOBBY
Address: 2121 KENILWORTH AVE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: D () Delete
Name: MILLER, JERRY
Address: 3217 SR 40
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: GORINI, FRED
Address: 1818 TAYLOR ROAD
City-St-Zip: PORT ORANGE, FL 32128

Title: D (X) Delete
Name: POLLOCK, PAUL
Address: 3701 S CLYDE MORRIS BLVD
City-St-Zip: PORT ORANGE, FL 32127

Title: D (X) Delete
Name: TOLLESON, RODNEY
Address: 211 BAT STREET
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BOBBY SMITH

D

01/22/2009

Electronic Signature of Signing Officer or Director

Date