

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 20, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000001775

1. Entity Name

6AM INTERCESSORY PRAYER WARRIORS CORPORATION



Principal Place of Business

470 W 33RD ST
RIVIERA BEACH FL 33404

Mailing Address

470 W 33RD ST
RIVIERA BEACH FL 33404



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/07)

4. FEI Number

15-3146752

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOSTON, MARY DR
470 W 33RD ST
RIVIERA BEACH FL 33404

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Mary Boston

Mary Boston

7/16/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 5, 2007

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 P ☐ Delete
NAME NEWBOLD, MYRTLE
STREET ADDRESS 4930 HAVERHILL COMMON CIR #32
CITY- ST- ZIP WEST PALM BEACH FL

TITLE V ☐ Delete
NAME HAYES, JOHNNIE MAE
STREET ADDRESS 480 W 35TH ST
CITY- ST- ZIP RIVIERA BEACH FL 33404

TITLE S ☐ Delete
NAME BROWN, ELDER LARONDA
STREET ADDRESS 5107 PINWOOD AVE
CITY- ST- ZIP WEST PALM BEACH FL 33407

TITLE T ☐ Delete
NAME YOUNG, OLIVIA
STREET ADDRESS 1380 W 32ND ST
CITY- ST- ZIP RIVIERA BEACH FL 33404

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

Mary Boston

Mary Boston

7/16/07 56/1448275