2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 08:00 A
Secretary of State

\Box	CÙ	MENT	# NO	4 000	002	ሰ 30
-	\sim	IVILLINI	# 110	4000	UUZ	.UUU

1 Entity Name

HIGHER PRAISE MINISTRIES OF LAKE WALES, INC.



Principal Place of Business

126 SOUTH WETMORE LAKE WALES, FL 33853

Mailing Address

2446 3RD STREET N.E. Winter Haven, FL 33881



DO NOT WRITE IN THIS SPACE

04302007 No Chg-NP CR2E037 (4/06)

4. FEI Number 86-1092919 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LONTON, HAROLD L 2446 3RD STREET N.E. WINTER HAVEN, FL 33881

DO NOT WRITE IN THIS SPACE

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. Tam familiar with, and accept the obligations of registered agent.										
SIGNATURE Sgnahure, typed or printed name of registered agent and tilled applicable. (NOTE: Registered Agent signature required when constituting) DATE										
	Filing Fee is \$61,25 Due by May 1, 2007	Election Campaign Financ Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	U00000761320 05/25/07-80075-014	70.00				
10.	OFFICERS AND DIRE	CTORS			· .					
TITLE NAME SIREET ADDRESS GITY-ST-ZIP	D PARKER, RALPH 920 FLORIDA AVE DUNDEE, FL 33838									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, HERBERT 406 AVENUE Y N.E. WINTER HAVEN, FL 33881									
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D LEGGITT, GRANT 3339 CRANEY ST WINTER HAVEN, FL 33881			DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-7IP	T LONTON, JULIA 312 ULRICH AVENUE WINTER HAVEN, FL 33881			ÎN '	THIS SPACE					
NAME STHEET ADDRESS CITY-ST-ZIP	VP LONTON, GLORIA 2446 3RD ST NE WINTER HAVEN, FL 33881									
NAME STREET ADDRESS CITY-ST-ZIP						,				
12. Thereby 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 of 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										