## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004213

Entity Name: CIRCLE OF PRAYER WARRIORS INC.

Apr 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

565 NE 34 CT

OAKLAND PARK, FL 33334

**New Mailing Address: Current Mailing Address:** 

565 NE 34 CT

OAKLAND PARK, FL 33334

FEI Number: 52-2392323 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERRING, BONNIE HERRING, BONNIE L PDT 565 NE 34TH CT - APT B 565 NE 34TH CT - APT B

OAKLAND PARK, FL 33334 US OAKLAND PARK, FL 33334 US

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: BONNIE L HERRING 04/21/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD () Delete (X) Change ( ) Addition HERRING, BONNIE HERRING, BONNIE L PTD Name: Name: 565 NE 34TH CT - APT B Address: 565 NE 34TH CT - APT B Address: City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334

Title: SD Title: (X) Change ( ) Addition ( ) Delete HERRING, LAKESHIA Name: HERRING, LAKESHIA N SD Name: Address: 565 NE 34TH CT - APT B Address: 565 NE 34TH CT - APT B City-St-Zip: OAKLAND PARK, FL 33334 City-St-Zip: OAKLAND PARK, FL 33334

Title: () Delete Title: (X) Change ( ) Addition

NORMAN, SONYA NORMAN, SONYA D Name: Name: 1040 SW 76TH AVE - APT 2 1040 SW 76TH AVE - APT 2 Address: Address: City-St-Zip: N LAUDERDALE, FL 33368 City-St-Zip: N LAUDERDALE, FL 33368

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: BONNIE L HERRING PTD 04/21/2009