

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2007
Secretary of State**

DOCUMENT# N04000006732

Entity Name: SHARING TABERNACLE OF PRAISE MINISTRIES, INC.

Current Principal Place of Business:

437 NW 9 AVE #1
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

437 NW 9 AVE #1
FT LAUDERDALE, FL 33311

New Mailing Address:

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

Name and Address of Current Registered Agent:

DUNLAP, TERRY L
1600 NW 6TH PLACE BLDG 3
APT 204
FT LAUDERDALE, FL 33311 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: HARDY, EARNESTINE
Address: 437 NW 9 AVE #1
City-St-Zip: FT LAUDERDALE, FL 33311

Title: V () Delete
Name: SLATER, VANESSA L
Address: 1521 NW 19 AVE
City-St-Zip: FT LAUDERDALE, FL 33311

Title: TS () Delete
Name: DUNLAP, TERRY L
Address: 1600 NW 6TH PLACE BLDG 3 APT 204
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D () Delete
Name: JOHNSON, WILLIE L
Address: 1430 NW 11 CT
City-St-Zip: FT LAUDERDALE, FL 33311

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:

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: EARNESTINE HARDY

P

01/17/2007

Electronic Signature of Signing Officer or Director

Date