2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009875

FILED Feb 15, 2006 Secretary of State

Entity Name: BELIEVERS PRAYER CONFERENCE, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
	KIMBERLY BLVD AUDERDALE, FL 33068	US			
Current Mailing Address:		New Mailir	New Mailing Address:		
6043 A&B KIMBERLY BLVD					
	AUDERDALE, FL 33068	US			
FEI Number:	FEI Numbe	r Applied For()	FEI Number Not Appli	cable (X) Certificate of Status Desired ()	
Name and	Address of Current Reg	istered Agent:	Name and	Address of New Registered Agent:	
	R, JOHN KIMBERLY BLVD AUDERDALE, FL 33068	US			
	named entity submits this e of Florida.	statement for the p	urpose of changing it	s registered office or registered agent, or both	
SIGNATUF	RE:				
	Electronic Signature	of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
Title: Name: Address: City-St-Zip:	P () Delete DALRYMPLE, LAWRENCE S 6043 A&B KIMBERLY BLVD NORTH LAUDERDALE, FL 33		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () Delete MACHADO, JOHN 6043 A&B KIMBERLY BLVD NORTH LAUDERDALE, FL 33	3068 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete QUINCE, JERRY 6043 A&B KIMBERLY BLVD NORTH LAUDERDALE, FL 33	3068 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete CHRISTIE, GLEN 6043 A&B KIMBERLY BLVD NORTH LAUDERDALE, FL 33	3068 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FIN. () Delete EMILIMOR, LILEEN 6270 SW 8 CT NORTH LAUDERDALE, FL 33	3068	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	() Delete		Title: Name:	D () Change (X) Addition EMILIMOR, JOHN	

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: JOHN EMILIMOR D 02/15/2006