

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006172

FILED
Mar 14, 2009
Secretary of State

Entity Name: ELISHA COMPANY OF PROPHETS, INC.

Current Principal Place of Business:

305 CHAUNCEY AVE EAST
BRADENTON, FL 34208

New Principal Place of Business:

6570 ANCHOR LOOP
203
BRADENTON, FL 34212

Current Mailing Address:

P.O. BOX 1792
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 20-3165954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, RICHARD V
305 CHAUNCEY AVE EAST
BRADENTON, FL 34208 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/D () Delete
Name: SMITH, BENJAMIN N APOSTLE
Address: P.O. BOX 1792
City-St-Zip: BRADENTON, FL 34206

Title: VP/D () Delete
Name: SMITH, SCHEVON C
Address: P.O. BOX 1792
City-St-Zip: BRADENTON, FL 34206

Title: T/D () Delete
Name: MITCHELL, MARY
Address: TREASURE COVE
City-St-Zip: NASSAU, BA

Title: D () Delete
Name: LEE, RICHARD V
Address: 305 CHAUNCEY AVE EAST
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: COUGHRAN, RAY APOSTLE
Address: FORTHWORTH
City-St-Zip: FORTHWORTH, TX

Title: D () Delete
Name: ROBERTS, RODNEY J APOSTLE
Address: SOUTH BEACH
City-St-Zip: NASSAU, BA

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:

Title: D (X) Change () Addition
Name: SHAFFER, STEPHEN
Address: 6089 MARELLA DR
City-St-Zip: SARASOTA, FL 34243

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SCHEVON SMITH

VP

03/14/2009

Electronic Signature of Signing Officer or Director

Date