## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000011922

FILED Jan 31, 2008 Secretary of State

Entity Name: AWESOME GOD PRAYER CENTER & MINISTRIES, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
517 A BAR	TON BOULEVA GE, FL 32955				
Current Mailing Address:			New Mailir	New Mailing Address:	
	TON BOULEVA GE, FL 32955	ARD US			
FEI Number:	16-1696257	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1840 SW 22 4TH FLOOF MIAMI, FL	R 33145 US				
in the State		ibmits this statement for the pur	pose of changing it	s registered office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E BOSLEY, LORET 517 A BARTON B ROCKLEDGE, FL	OULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () E DOTSON, RODNI 517 A BARTON B ROCKLEDGE, FL	OULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () E ROBERTS, DELA 517 A BARTON B ROCKLEDGE, FL	OULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () E BEAGLE, ERIKA 517 A BARTON B ROCKLEDGE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E BOSLEY, LORET 517 A BARTON B ROCKLEDGE, FL	OULEVARD	Title: Name: Address: City-St-Zip:	VD (X) Change ( ) Addition WIRE, SHEILA 517 A BARTON BOULEVARD ROCKLEDGE, FL 32955	
Title: Name: Address: City-St-Zip:	VD () E WINSTON, DAVIS 517-A BARTON E ROCKLEDGE, FL	BLVD	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: LORETTA E. BOSLEY PRES 01/31/2008