

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012394

FILED
Mar 09, 2010
Secretary of State

Entity Name: PREVAILING WORD CHRISTIAN CENTER, INC.

Current Principal Place of Business:

262 TOBIAS AVE.
MOORE HAVEN, FL 33471

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1337
MOORE HAVEN, FL 33471

New Mailing Address:

FEI Number: 74-3154548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALLARD, BETTY J MRS.
411 ELMWOOD AVENUE
MOORE HAVEN, FL 33471 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: D
Name: FORD, MAZIE T REV.
Address: POST OFFICE BOX 652
City-St-Zip: MOORE HAVEN, FL 33471

Title: D
Name: FORD, CHARLIE L SR.
Address: POST OFFICE BOX 652
City-St-Zip: MOORE HAVEN, FL 33471

Title: D
Name: DAVIDSON, JAMES SR.
Address: POST OFFICE BOX 484
City-St-Zip: MOORE HAVEN, FL 33471

Title: D
Name: MALLARD, BETTY J MRS.
Address: POST OFFICE BOX 382
City-St-Zip: MOORE HAVEN, FL 33471

Title: D
Name: PEMBERTON, BRIJIN E
Address: 551 ONEIDA COURT
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: HUGGINS, FELTON
Address: POST OFFICE BOX 1220
City-St-Zip: MOORE HAVEN, FL 33471

I hereby 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 all other like empowered.

SIGNATURE: MAZIE T. FORD

D

03/09/2010

Electronic Signature of Signing Officer or Director

Date