2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N05000012833

Entity Name: FAITH AND PRAISE ANONITED WORSHIP CENTER, INC.

Current Principal Place of Business:

2420 S.W. 81ST AVENUE, #7-402
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

2420 S.W. 81ST AVENUE, #7-402
DAVIE, FL 33324

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MORGANS FINANCIAL SERVICES
4111 STIRLING RD
SUITE 202
FT LAUDERDALE, FL 33314 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: PP ( ) Delete
Name: SEWELL, MELBOURNE
Address: 2420 S.W. 81ST AVENUE, #7-402
City-St-Zip: DAVIE, FL 33324

Title: T ( ) Delete
Name: SEWELL, WINSLOW
Address: 2420 S.W. 81ST AVENUE, #7-402
City-St-Zip: DAVIE, FL 33324

Title: S ( ) Delete
Name: SEWELL, BETHUNE
Address: 2420 S.W. 81ST AVENUE, #7-402
City-St-Zip: DAVIE, FL 33324

Title: V ( ) Delete
Name: SEWELL, ATREISHA
Address: 2420 S.W. 81ST AVENUE, #7-402
City-St-Zip: DAVIE, FL 33324

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 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: MELBOURNE SEWELL P 05/04/2009

Electronic Signature of Signing Officer or Director — Date