

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001530

FILED
Jun 15, 2009
Secretary of State

Entity Name: HOUSE OF PRAISE CHURCH OF GOD IN CHRIST INC.

Current Principal Place of Business:

12412 MIDPOINTE DR
RIVERVIEW, FL 33578 US

New Principal Place of Business:

Current Mailing Address:

12412 MIDPOINTE DR
RIVERVIEW, FL 33578 US

New Mailing Address:

FEI Number: 20-3454096 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

Name and Address of New Registered Agent:

WILLIAMS, DONNELL D
12412 MIDPOINTE DR
RIVERVIEW, FL 33578 US

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: PD () Delete
Name: WILLIAMS, DONNELL D
Address: 12412 MIDPOINTE DR
City-St-Zip: RIVERVIEW, FL 33578 US

Title: VPD () Delete
Name: WILLIAMS, TANYA A
Address: 12412 MIDPOINTE DR
City-St-Zip: RIVERVIEW, FL 33578 US

Title: T () Delete
Name: TATUM, TROY
Address: 1525 E. 128TH AVE
City-St-Zip: TAMPA, FL 33612 US

Title: S () Delete
Name: FAIR, PAMELA
Address: 2106 W. POWHATAN AVE
City-St-Zip: TAMPA, FL 33603 US

Title: D () Delete
Name: SMITH, DELORES
Address: 6904 RIVER RUN DR #202
City-St-Zip: TAMPA, FL 33617 US

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: S (X) Change () Addition
Name: POWELL, CAREN
Address: 6910 RIVER RUN DR APT.#101
City-St-Zip: TAMPA, FL 33617 US

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: DONNELL D WILLIAMS

PD

06/15/2009

Electronic Signature of Signing Officer or Director

Date