2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004738

Entity Name: WOMEN OF PRAISE, INC

FILED May 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2150 NORTHEAST 1ST AVENUE POMPANO BEACH, FL 33060 **Current Mailing Address: New Mailing Address:** 2150 NORTHEAST 1ST AVENUE POMPANO BEACH, FL 33060 FFI 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: Name and Address of New Registered Agent: JOSEPH, LAVERN 2150 NORTHEAST 1ST AVENUE POMPANO BEACH, FL 33060 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JOSEPH, LAVERN Name: Name: 2150 NORTHEAST 1ST AVENUE Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: CEO () Delete Title: () Change () Addition JOSEPH, LAVERN Name: Name: Address: 2150 NORTHEAST 1ST AVENUE Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: **EOVP** () Delete Title: () Change () Addition JOSEPH, KESNEL Name: Name: 2150 NORTHEAST 1ST AVENUE Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: WRIGHT, LEANETTA Name: Address: 19 NW 45TH AVE #107 Address: City-St-Zip: DEERFIELD, FL 33442 City-St-Zip: Title: () Delete Title: () Change () Addition MCINTOSH, DEBRA Name: Name: 2150 NORTHEAST 1ST AVENUE Address: Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: Title: () Delete Title: () Change () Addition BROOKS, OSSIE M Name: Name: Address: 519 NW 14TH AVENUE #C205 Address: FT. LAUDERDALE, FL 33312 City-St-Zip: 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: LAVERN JOSEPH CEO 05/24/2007