

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06555

FILED
Mar 13, 2009
Secretary of State

Entity Name: HOUSE OF PRAYER APOSTOLIC FAITH CHURCH OF GOD INC.

Current Principal Place of Business:

2112 MITCHELL CT
FT. MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

2112 MITCHELL CT
FT. MYERS, FL 33916

New Mailing Address:

FEI Number: 59-2559908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODNEY DAVIS
4121 SW 9TH PL
CAPE CORAL, FL 33914 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 () Delete
Name: DAVIS, RODNEY ELD.
Address: 4121 SW 9TH PL
City-St-Zip: CAPE CORAL, FL 33914

Title: PD () Delete
Name: DAVIS, ELLA M PASTOR
Address: 3853 ROGERS STREET
City-St-Zip: FT. MYERS, FL 33901

Title: D () Delete
Name: DAVIS, SAMUEL ELD.
Address: 4928 JEANIE LN.
City-St-Zip: FORT MYERS, FL 33905

Title: D () Delete
Name: SYKES, JUDY
Address: 3853 ROGERS STREET
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: BURDETTE, JOHN
Address: 3243 ANTICA ST.
City-St-Zip: FORT MYERS, FL 33905

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: SYKES, JUDY W PASTOR
Address: 3853 ROGERS STREET
City-St-Zip: FT. MYERS, FL 33901

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MCNEAL, JULIAN ASST. P
Address: 2112 MITCHELL CT.
City-St-Zip: FORT MYERS, FL 33901

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: MCNEAL, DEBORAH
Address: 2112 MITCHELL CT.
City-St-Zip: CAPE CORAL, FL 33990

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: RODNEY J. DAVIS

RA

03/13/2009

Electronic Signature of Signing Officer or Director

_____ Date