

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N06719 (1)

1. Corporation Name

THE HOUSE OF PRAYER CHURCH OF THE LATTER DAY SAINTS, INC.



Principal Place of Business

151 NW 79TH ST.  
MIAMI FL 33150  
US

Mailing Address

1775 NW 90 ST  
MIAMI FL 33147  
US

3. Date Incorporated or Qualified  
12/19/1984

3a. Date of Last Report  
03/22/1995

2. Principal Place of Business

21 151 NW 79 ST

2a. Mailing Address

26 1775 N.W. 90 ST

4. FEI Number  
59-2480319

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☒

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

City & State

23 miami, Fla

City & State

28 miami, Florida

Zip

24 33150

Country

25 Dade

Zip

29 33147

Country

30 Dade

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, PEARLIE  
1775 N.W. 90TH STREET  
MIAMI FL

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Pearlle M. Brown V.D.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-11-96

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE  
NAME BROWN, ROBERT C.  
STREET ADDRESS 1775 NW 90TH ST.  
CITY - ST - ZIP MIAMI FL

TITLE VD ☐ DELETE  
NAME BRWON, PEARLIE M.  
STREET ADDRESS 1775 NW 90TH ST.  
CITY - ST - ZIP MIAMI FL

TITLE SD ☐ DELETE  
NAME HARBIN, CHRISTINE  
STREET ADDRESS 7201 NE MIAMI CT.  
CITY - ST - ZIP MIAMI FL

TITLE T ☐ DELETE  
NAME FENN, CLIFFORD  
STREET ADDRESS 2100 NW 94TH ST.  
CITY - ST - ZIP MIAMI FL

TITLE T ☐ DELETE  
NAME JACKSON JR., MOSES  
STREET ADDRESS 1620 NW 4TH AVE  
CITY - ST - ZIP MIAMI FL

TITLE S ☐ DELETE  
NAME MOORER, RUTH  
STREET ADDRESS 2100 NW 94TH ST  
CITY - ST - ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pearlle M. Brown  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96

305 691-0157

Date

Daytime Phone #

CR2E037 (12/95)