

2000 UNIFORM BUSINESS REPORT (UBR)

3/3/8

FILED
Jul 05, 2000 8:00 am
Secretary of State

03-08-2000 90038 011 ****61.25

DOCUMENT # N06719
 1. Entity Name
THE HOUSE OF PRAYER CHURCH OF THE LATTER DAY SAI

Principal Place of Business 151 N.W. 79TH STREET MIAMI FL 33150 US	Mailing Address 1775 N.W. 90TH STREET MIAMI FL 33147-3640 US
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2. Principal Place of Business <i>House of Prayer Church LDS.</i>	3. Mailing Address <i>Pearlie M. Brown</i>
Suite, Apt. #, etc. <i>151 N.W. 79 St</i>	Suite, Apt. #, etc. <i>1775 N.W. 90 St</i>

City & State <i>Miami Florida</i>	City & State <i>Miami Florida</i>
Zip <i>33150</i>	Zip <i>33147</i>
Country <i>JADE</i>	Country <i>JADE</i>



DO NOT WRITE IN THIS SPACE

4. FEI Number <i>65-0997715</i> APPLIED FOR	Applied For <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BROWN, PEARLIE 1775 N.W. 90TH STREET MIAMI FL	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL - Zip Code
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8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P	<input type="checkbox"/> Delete BROWN, ROBERT C. 1775 NW 90TH ST. MIAMI FL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VD	<input type="checkbox"/> Delete BRWON, PEARLIE M. 1775 NW 90TH ST. MIAMI FL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD	<input type="checkbox"/> Delete HARBIN, CHRISTINE 7201 NE MIAMI CT. MIAMI FL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T	<input checked="" type="checkbox"/> Delete HARRIS, JOHN J. 4321 N W 187 ST MIAMI FL 33055	TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>Martin J. McGhie</i>	<i>1021 N.W. 141 St. Miami, Florida 33168</i>
TITLE T	<input type="checkbox"/> Delete JACKSON JR., MOSES 1620 NW 4TH AVE MIAMI FL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S	<input type="checkbox"/> Delete MOORER, RUTH 2100 NW 94TH ST MIAMI FL	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Pearlie M. Brown* 305691-057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/93)