

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009323

FILED
Mar 27, 2009
Secretary of State

Entity Name: PRAYING FOR OUR CHILDREN, INC.

Current Principal Place of Business:

383 COMFORT DRIVE
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

383 COMFORT DRIVE
APOPKA, FL 32712 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEWELL, TONYA N
383 COMFORT DRIVE
APOPKA, FL 32712 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: P () Delete
Name: HARRIS, DEBORAH M DR.
Address: 5447 ALANIS PLACE
City-St-Zip: MABLETON, GA 30126 US

Title: VP () Delete
Name: FEWELL, TONYA N
Address: 383 COMFORT DRIVE
City-St-Zip: APOPKA, FL 32712 US

Title: T () Delete
Name: FEWELL, HUGHIE E
Address: 3491 NESBIT RD
City-St-Zip: FAYETTEVILLE, NC 28311 US

Title: VP () Delete
Name: HINES-KNOX, CANDIE D
Address: 2625 LAUREL LAKES ROAD
City-St-Zip: FAYETTEVILLE, NC 28301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: FEWELL, HUGHIE E
Address: 318 LIONSHEAD ROAD
City-St-Zip: FAYETTEVILLE, NC 28311 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: TONYA FEWELL

VP

03/27/2009

Electronic Signature of Signing Officer or Director

Date