

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001546

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: "CHURCH OF HOLY FAITH AND PRAYER, INC."

**Current Principal Place of Business:**

220 GANDY STREET  
AUBURNDALE, FL 33823

**New Principal Place of Business:**

**Current Mailing Address:**

220 GANDY STREET  
AUBURNDALE, FL 33823

**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:**

THOMPSON, JAMES JR.  
2727 AVE. M., N.W.  
WINTER HAVEN, FL 33881 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: CHATMON, WILLIE F SR.  
Address: 505 ARAPAHOE AVE.  
City-St-Zip: LAKELAND, FL 33805

Title: D ( ) Delete  
Name: BROOKINS, SANFORD  
Address: 1007 W. 6TH STREET  
City-St-Zip: LAKELAND, FL 33805

Title: D ( ) Delete  
Name: THOMPSON, JAMES JR.  
Address: 2727 AVE. M. N.W.  
City-St-Zip: WINTER HAVEN, FL 33881

Title: D ( ) Delete  
Name: CHATMON, FELICIA  
Address: 505 ARAPAHOE AVE.  
City-St-Zip: LAKELAND, FL 33805

Title: D ( ) Delete  
Name: BEATY, GIGI  
Address: 813 HARMONY HILLS LOOPS  
City-St-Zip: LAKELAND, FL 33805

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: PASTOR WILLIE CHATMON

MR

03/22/2009

Electronic Signature of Signing Officer or Director

Date