

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003634

FILED
Mar 20, 2009
Secretary of State

Entity Name: HOUSE OF PRAYER REVIVAL CENTER, INC

Current Principal Place of Business:

5019 NORTH 30TH STREET
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

2807 EAST CARACAS STREET
TAMPA, FL 33610

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS, PETER
2807 EAST CARACAS STREET
TAMPA, FL 33610 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: WILLIAMS, GLADYS G
Address: 2807 EAST CARCAS STREET
City-St-Zip: TAMPA, FL 33610

Title: VP () Delete
Name: WILLIAMS, PETER
Address: 2807 EAST CARACAS STREET
City-St-Zip: TAMPA, FL 33610

Title: SEC () Delete
Name: PETERSON, QUEEN
Address: 3111 24TH STREET NORTH
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, PETER L
Address: 2807 EAST CARCAS STREET
City-St-Zip: TAMPA, FL 33610

Title: VP (X) Change () Addition
Name: NORRIS, CURTIS
Address: 5024 56TH STREET
City-St-Zip: TAMPA, FL 33610

Title: SEC (X) Change () Addition
Name: WILLIAMS, JL
Address: 2803 ELCOIT
City-St-Zip: TAMPA, FL 33610

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: PETER WILLIAMS

P

03/20/2009

Electronic Signature of Signing Officer or Director

Date