2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005709

FILED Apr 30, 2009 Secretary of State

Entity Name: HOUSE OF PRAYER ASSEMBLY OF JESUS CHRIST, INC.

Current Principal Place of Business: New Principal Place of Business: 2190 RESERVE PARK TRACE 1203 ORANGE AVENUE FORT PIERCE, FL 34950 US SUITE 5 AND 6 PORT SAINT LUCIE, FL 34986 US **New Mailing Address: Current Mailing Address:** 1713 SE ANECI STREET PORT SAINT LUCIE, FL 34983 US FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOYLMAN, KEITH R 1713 SE ANECI STREET PORT SAINT LUCIE, FL 34983 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HOYLMAN, HAZEL A Name: Name: 1713 SE ANECI STREET Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: LUTHER, SHELIA Name: Address: 1381 SE ELYTON CT. Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 US City-St-Zip: Title: () Delete Title: () Change () Addition SCOTT, CARRIE M Name: Name: Address: 3306 AVENUE K Address: City-St-Zip: FORT PIERCE, FL 34947 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: HOYLMAN, KEITH R Name: Address: 1713 SE ANECI STREET Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 US 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: HAZEL HOYLMAN P 04/30/2009