

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005765

FILED
Mar 24, 2012
Secretary of State

Entity Name: FELLSMERE COMMUNITY PRAYER AND WORSHIP CENTER INC.

Current Principal Place of Business:

1025 WEST GRANT
FELLSMERE, FL 32948

New Principal Place of Business:

Current Mailing Address:

1025 WEST GRANT
FELLSMERE, FL 32948

New Mailing Address:

FEI Number: 38-3783555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, ANNIE MAE
1051 VERNON STREET
FELLSMERE, FL 32948 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
Name: BROWN, ANNIE MAE
Address: 1051 VERNON STREET
City-St-Zip: FELLSMERE, FL 32948

Title: S
Name: COLLINS, ALMA
Address: 125 NORTH LIME STREET
City-St-Zip: FELLSMERES, FL 32948

Title: BM
Name: DOCTOR, AMMIE
Address: 1054 STATE STREET
City-St-Zip: FELLSMERE, FL 32948

Title: BM
Name: BROWN, ANTHONY 111
Address: 1051 VERNON STREET
City-St-Zip: FELLSMERE, FL 32948

Title: T
Name: BROWN, ANTHONY SR
Address: 1051 VERNON ST
City-St-Zip: FELLSMERE, FL 32948

Title: BM
Name: JUANITA, LEWIS
Address: 1020 STATE STREET
City-St-Zip: FELLSMERE, FL 32948

I hereby 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 all other like empowered.

SIGNATURE: MINISTER ANNIE MAE BROWN

P

03/24/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date