

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000002023

FILED
May 01, 2011
Secretary of State

Entity Name: GRACE TEMPLE OF PRAISE WORSHIP CENTER, INC

Current Principal Place of Business:

343 WEST CENTRAL AVE
SUITE 6
LAKE WALES, FL 33853 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 97
LAKE WALES, FL 33853 US

New Mailing Address:

FEI Number: 90-0540326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, ALMA M
343 WEST CENTRAL AVE
SUITE 6
LAKE WALES, FL 33853 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: DAVIS, ALMA M
Address: 343 WEST CENTRAL AVE SUITE 6
City-St-Zip: LAKE WALES, FL 33853 US

Title: VP
Name: SHEPARD, JERMAINE D
Address: 401 WINSTON AVE APT. P4
City-St-Zip: LAKE WALES, FL 33853 US

Title: DIR
Name: ROWELL, CHERYL D
Address: 943 HIGHLAND CREST CIR
City-St-Zip: LAKE WALES, FL 33853 US

Title: DIR
Name: SHEPARD, ANGIE M
Address: 455 BUCKMORE ROAD #32
City-St-Zip: LAKE WALES, FL 33853 US

Title: DIR
Name: STOUEMIRE, BARBARA
Address: 455 BUCKMORE ROAD #19
City-St-Zip: LAKE WALES, FL 33853 US

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: ALMA DAVIS

MS

05/01/2011

Electronic Signature of Signing Officer or Director

Date