

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
JUL 11 AM 8:13

DOCUMENT # N10120 (6)

1. Corporation Name

GOD'S CHURCH OF PRAISE, INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O THEARTIS DAWSON
2455 SANTANA AVENUE
ORLANDO FL 32811

C/O THEARTIS DAWSON
2455 SANTANA AVENUE
ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/09/1985

3a. Date of Last Report

04/20/1994

4. FEI Number

59-2949938

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

☒ \$68.75 Supplemental Fee Not Required

8. The corporation has liability for intangible tax under § 199.032, Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAWSON, THEARTIS
2455 SANTANA AVENUE
ORLANDO FL 32811

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person or persons authorized to act as registered agent and file this statement

Signature of person or persons authorized to act as registered agent and file this statement

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	DAWSON, THEARTIS
STREET ADDRESS	2455 SANTANA AVENUE
CITY, ST, ZIP	ORLANDO FL
TITLE	SD
NAME	ORRIS, JOHN HENRY
STREET ADDRESS	817 EAST SOUTH STREET
CITY, ST, ZIP	ORLANDO FL
TITLE	VD
NAME	MCKINNEY, ROOSEVELT L.
STREET ADDRESS	1126 DEWEY AVENUE
CITY, ST, ZIP	ORLANDO FL
TITLE	TD
NAME	COMBS, MICHAEL R.
STREET ADDRESS	6225 W. LIVINGSTON AVE.
CITY, ST, ZIP	ORLANDO FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Theartis Dawson THEARTIS DAWSON 5/8/95 407 423-8056

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Signature