

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005640

FILED
Feb 10, 2012
Secretary of State

Entity Name: GATES OF PRAYER MINISTRIES, INC.

Current Principal Place of Business:

6327 CHRISTOPHER CREEK ROAD WEST
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6327 CHRISTOPHER CREEK ROAD WEST
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 61-1675588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, NANCY
6327 CHRISTOPHER CREEK ROAD WEST
JACKSONVILLE, FL 32217 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: DIR
Name: KAPLAN, NANCY
Address: 6327 CHRISTOPHER CREEK ROAD WEST
City-St-Zip: JACKSONVILLE, FL 32217

Title: D
Name: SWEDBERG, SUSANNAH
Address: 4606 PALAMINO CROSSING
City-St-Zip: UPPER MARLBORO, MD 207720000

Title: D
Name: USUAL, AMECIA DR.
Address: 14524 OWINGS AVE
City-St-Zip: BRANDYWINE, MD 20613

Title: D
Name: JACKSON, YVONNETTA
Address: 1911 WESTBRIDGE DRIVE UNIT 436
City-St-Zip: ANNAPOLIS, MD 21401

Title: D
Name: SCRIVNER, JENNIFER DR. PHD
Address: 4055 HICKORY FAIRWAY DRIVE
City-St-Zip: WOODSTOCK, GA

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: NANCY KAPLAN

DIR

02/10/2012

Electronic Signature of Signing Officer or Director

Date