

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90011 012 ****61.25

DOCUMENT # N13239

1. Entity Name

HOUSE TO HOUSE PRAYER BAND, A CORPORATION NOT FOR PROFIT



Principal Place of Business

2925 ASHVILLE ROAD
MONTICELLO FL 32344
US

Mailing Address

2925 ASHVILLE ROAD
MONTICELLO FL 32344
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROOKINS, JIMMY (REV)
2925 ASHVILLE ROAD
MONTICELLO FL 32344

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature is not used when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BROOKINS, MINER A.
STREET ADDRESS 2925 ASHVILLE RD
CITY-ST-ZIP MONTICELLO FL

TITLE VD ☐ Delete
NAME BROOKINS, JIMMY (REV)
STREET ADDRESS 2925 ASHVILLE RD
CITY-ST-ZIP MONTICELLO FL

TITLE S ☒ Delete
NAME SAILOR, VIOLET K.
STREET ADDRESS 990 SOUTH TUNG STREET
CITY-ST-ZIP MONTICELLO FL

TITLE TD ☐ Delete
NAME WHITFIELD, EVA
STREET ADDRESS 615 POPULAR STREET
CITY-ST-ZIP MONTICELLO FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME JANIE NEELY
STREET ADDRESS 1091 BARNES RD.
CITY-ST-ZIP MONTICELLO, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIMMY BROOKINS (REV) *Jimmy Brooks* 4-2-08 (850) 545-2214