

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13792

FILED
Mar 17, 2011
Secretary of State

Entity Name: ST. JAMES HOUSE OF PRAYER OF THE APOSTOLIC FAITH, INC.

Current Principal Place of Business:

2146 CHURCH STREET
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

2146 CHURCH STREET
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 59-2707217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOPER, JACQUELYN D
2501 CRAWFORD DR
SANFORD, FL 32771 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: PD
Name: COOPER, EUGENE
Address: 2501 CRAWFORD DR.
City-St-Zip: SANFORD, FL 32771 US

Title: VD
Name: ROBINSON, LARRY J
Address: 1506 MELLONVILLE
City-St-Zip: SANFORD, FL 32771 US

Title: SD
Name: COOPER, JACQUELYN D
Address: 2501 CRAWFORD DR.
City-St-Zip: SANFORD, FL 32771 US

Title: T
Name: JONES, MARY R
Address: 2230 DOLARWAY
City-St-Zip: SANFORD, FL 32771 US

Title: DEA
Name: KENDRICK, JEFFREY B
Address: 2230 DOLARWAY
City-St-Zip: SANFORD, FL 32771 US

Title: AS
Name: GORDON, CASSANDRA
Address: 2501 CRAWFORD DR.
City-St-Zip: SANFORD, FL 32771 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: JACQUELYN D. COOPER

SD

03/17/2011

Electronic Signature of Signing Officer or Director

Date