

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 17, 2005
Secretary of State**

DOCUMENT# N15100

Entity Name: PRAYER TEMPLE CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

1936 SAXON STREET
TALLAHASSEE, FL 32310 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7651
TALLAHASSEE, FL 32314 US

New Mailing Address:

FEI Number: 58-0075711 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, CHARLIE E
2740 HICKORY RIDGE ROAD
TALLAHASSEE, FL 32308 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 () Delete
Name: RICHARDSON, C.E.,
Address: 2740 HICKORY RIDGE RD
City-St-Zip: TALLAHASSEE, FL

Title: SD () Delete
Name: FLOYD, KATIE
Address: 912 KRIDGE ROAD
City-St-Zip: TALLAHASSEE, FL

Title: TD () Delete
Name: DICKEY, ELLA
Address: 1500 JOE LOUIS STREETROAD
City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete
Name: MICKLER, LUCINDA
Address: 1417 E BREVARD #17
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: RICHARDSON, D'ANDRE,
Address: 2740 HICKORY RIDGE RD
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: MCCASKILL, BARBARA
Address: P.O. BOX 16261
City-St-Zip: TALLAHASSEE, FL 32317-626 US

Title: TD (X) Change () Addition
Name: DICKEY, ELLA
Address: P.O. BOX 467
City-St-Zip: MIDWAY, FL 32343

Title: D (X) Change () Addition
Name: MICKLER, LUCINDA
Address: 2699 FAIRMONT LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA P. MCCASKILL

SD

01/17/2005

Electronic Signature of Signing Officer or Director

Date