

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17219

FILED  
May 01, 2006  
Secretary of State

**Entity Name:** GOD'S MIRACLE HOUSE OF PRAYER CHURCH OF ORLANDO, FLORIDA, INC.

**Current Principal Place of Business:**

6840 SILVER STAR ROAD  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 617487  
ORLANDO, FL 328617487

**New Mailing Address:**

**FEI Number:** 59-2303040      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BRANDON, LILLIE V.  
1118 JUNIPER HAMMOCK COURT  
WINTER GARDEN, FL 34787 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: PSD ( ) Delete  
Name: BRANDON, DR. LILLIE, V.  
Address: 1118 JUNIPER HAMMOCK COURT  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete  
Name: LAGREE, MICHAEL L  
Address: 5023 HERNANDES DRIVE  
City-St-Zip: ORLANDO, FL 32808

Title: D ( ) Delete  
Name: JOHNSON, DEBORA L  
Address: 1850 AMERICUS MINOR DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete  
Name: HEGGS, DIANE  
Address: 710 SOUTH DIVISION AVENUE APT C-21  
City-St-Zip: ORLANDO, FL 32805

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 Chapter 119, 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: DR. LILLIE V. BRANDON

PSD

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date