## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Jun 06, 2006 8:00 am **Secretary of State** DOCUMENT # N17738 1. Entity Name 06-06-2006 90014 006 \*\*\*\*70.00 PRAISE CATHEDRAL RENEWAL CENTER, INC. Principal Place of Business Mailing Address % MICHAEL J. THOMAS 4371 76TH AVE NO % MICHAEL J. THOMAS 4371 76TH AVE NO PINELLAS PARK FL 33781 PINELLAS PARK FL 33781 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-2789116 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THOMAS, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 5533 81ST TERR NO PINELLAS PARK FL 33781 City 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 (NOTE: Registered Agent signature required when rejestiding) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Deacon TITLE ☐ Delete TITLE □ Change Addition Bob D'Andrea MOWRY, THOMAS NAME 8100 Wimerton Bd 2631 1ST ST NE STREET ADDRESS STREET ADDRESS Largo FL 33771 SAINT PETERSBURG FL 33704 CITY-ST-7IP CITY-ST-ZIP Deacon Delete ☐ Change THILE TITLE Addition BERT, WILLIE NAME NAME John Dan 3090 Walnut Street NE 22918 COLLRIDGE DR STREET ADDRESS STREET ADDRESS LAND O LAKES FL 34639 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition HILL, MARC NAME STREET ADDRESS 4435 1ST ST NE 312 STREET ADDRESS SAINT PETERSBURG FL 33703 CITY-ST-7IP CITY - ST - ZIP Delete TITLE TITLE ☐ Change Addition WOLFE, RICHARD MAME NAME STREET ADDRESS 7273 60TH AVE NORTH STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33709 CITY-ST-ZIP n Delete. TITLE TITLE ☐ Change ☐ Addition LONG, KEN NAME NAME 3235 8TH AVE N STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33713 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition THOMAS, MICHAEL NAME NAME 5533 81ST TERRACE, NORTH STREET ADDRESS STREET ADDRESS PINELLAS PARK FL CITY-ST-ZIP CITY-ST-ZIP

FILED

Michael & Ahoma SIGNATURE:

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.