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May 13 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N26799 (9)

1. Corporation Name

GOD IS LOVE PRAYER AND MISSION, INC.

Principal Place of Business

3450 N. MIAMI AVENUE  
MIAMI FL 33127  
US

Mailing Address

C/O SHIRLEY HUGHLEY  
P.O. BOX 38095  
MIAMI FL 33238  
US

3. Date Incorporated or Qualified  
06/06/1988

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0073464

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUGHLEY, SHIRLEY  
930 N.W. 55TH STREET  
MIAMI FL 33283

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME HUGHLEY, SHIRLEY  
STREET ADDRESS 930 NW 55 ST  
CITY-ST-ZIP MIAMI FL

1.1 TITLE ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME WILLIAMS, GLORIA  
STREET ADDRESS 7525 NW 4TH CT  
CITY-ST-ZIP MIAMI FL

2.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME BARNETT, GAIL  
STREET ADDRESS 1009 NW 43 ST  
CITY-ST-ZIP MIAMI FL

3.1 TITLE ☐ Change ☐ Addition

TITLE T ☐ DELETE

NAME HUGHLEY, JACQUETTA  
STREET ADDRESS 930 NW 55 ST  
CITY-ST-ZIP MIAMI FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Shirley Hughley SHIRLEY HUGHLEY 4/29/97 (305) 573-9060  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0078514

CR2E037 (9/96)