2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N30472

Entity Name: PROPHETIC PRAISE MINISTRIES, INC.

Current Principal Place of Business:

7124 HWY 22
PANAMA CITY, FL 32404 US

New Principal Place of Business:

Current Mailing Address:

7124 HWY 22
PANAMA CITY, FL 32404 US

New Mailing Address:

FEI Number: 59-2992738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GAY, ROBERT L
5139 STEWART DR.
PANAMA CITY, FL 32404 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:	GAY, ROBERT L.	
Address:	5139 STEWART DRIVE	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	D	( ) Delete
Name:	LAUZON, ROBERT M	
Address:	1331 W UNIVERSITY HEIGHTS DR N	
City-St-Zip:	FLAGSTAFF, AZ 86001	
Title:	D	( ) Delete
Name:	SANCHEZ, GILBERTO JR	
Address:	5128 STEWART DRIVE	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	D	( ) Delete
Name:	MCGOEY, PAUL M	
Address:	2410 MAPLE COURT	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:	SD	( ) Delete
Name:	GAY, STACEY D	
Address:	5139 STEWART DR	
City-St-Zip:	PANAMA CITY, FL 32404	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	VENKLER, DANNY	
Address:	265 N. CHARLENE DRIVE	
City-St-Zip:	PANAMA CITY, FL 32404	

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT L. GAY PD 04/29/2009

Electronic Signature of Signing Officer or Director — Date