2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2006 8:00 am
Secretary of State
04-27-2006 90220 038 ****70.00

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DOCUMENT # N35258

1. Entity Name
NEW JERUSALEM HOUSE OF PRAYER, INC.

Principal Place of Business	Mailing Address
258 E UNIVERSITY BLVD APT #4 MELBOURNE, FL 32901	P.O. BOX 2543 MELBOURNE, FL 32902

04242006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
256 E. University Blvd.	
Suite, Apt. #, etc. # B	Suite, Apt. #, etc.
City & State Melborne, FL.	City & State
Zip 32901 Country US United States	Zip Country

4. FEI Number 59-2977027 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GRANT, JEROME 258 E UNIVERSITY BLD #H MELBOURNE, FL 32907	Name Jerome Grant Street Address (P.O. Box Number is Not Acceptable) 256 E. University Blvd. # B City Melbourne FL Zip Code 32901

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 Jerome Grant 4/24/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD GRANT, ELDER JEROME (PAS 258 UNIVERSITY BLVD # H MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PASTOR Jerome Grant. 256 E. University Blvd #B Melborne, FL 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TM GRANT, DEANNA 258 E UNIVERSITY BLBD #H MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TM Deanna Grant 256 E. University Blvd # B Melborne, FL. 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VM GRANT, RITA 258 E UNIVERSITY BLVD #H MELBOURNE, FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VM Rita Grant 256 E. University Blvd. # B Melborne, FL. 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Jerome Grant Jerome Grant 05/22/06 (321) 984-9233
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #