


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90186 005 ****61.25

DOCUMENT # N40310

1. Entity Name
THE WAY, THE TRUTH AND THE LIFE CHURCH OF PRAISE, INC.



Principal Place of Business
**6609 NW 18TH AVENUE
 MIAMI, FL 33147**

Mailing Address
**PO BOX 510185
 MIAMI, FL 33151**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

04112006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0125553

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**COURTNEY, ELDER W
 6601 NW 18TH AVE
 MIAMI, FL 33147**

7. Name and Address of New Registered Agent
 Name **Elder W.R. Courtney**
 Street Address (P.O. Box Number is Not Acceptable)
3330 N.W. 210th Terr
 City **Miami, Gardens** FL Zip Code **33056**

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 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED COURTNEY, WR 6601 NW 18TH AVENUE MIAMI, FL 33147 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASON, GRACE 1246 FISHERMAN STREET OPA LOCKA, FL 33054 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD WOODS, EVA 1990 NW 4TH COURT #14 MIAMI, FL 33136 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD HUNTER, DARETTE 2115 NW 42ND STREET MIAMI, FL 33127 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD FELTON, LINDA BELL 3241 NW 173RD. TERR. MIAMI, FL 33056 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Elder W.R. Courtney 3330 N.W. 210 th Terrace Miami Gardens, Fla. 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Elder Danette Hunter 2115 N.W. 42 nd Street Miami, Fla. 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Elder Grace Mason 1246 Fisherman Street Opa Locka, Fla 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Deaconess Eva Woods 1990 N.W. 4 th Court #14 Miami, Fla 33136
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Evangelist Linda Felton 3241 N.W. 173 rd Terr Miami Gardens, Fla 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Prophetess Shirley Townsend 2941 N.W. 87 street Miami, Fla 33147

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: W.R. Courtney - W.R. COURTNEY 04-25-2006 (305) 624-6743
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #