FILED
May 01, 2006 08:00 AM
Secretary of State

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N45959

1. Entity Name
THE CHURCH OF PRAYER FOR ALL PEOPLE, INC.

Principal Place of Business	Mailing Address
RTE. 1 BOX 178 QUINCY, FL 32351 US	P.O. BOX 725 CHIPLEY, FL 32428 US

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04262006 No Chg NP CR2E037 (11/05)

4. FEI Number
59-3655818

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

6. Name and Address of Current Registered Agent

MCMILLION, FRED J
1305A MCMILLION'S LANE
CHIPLEY, FL 32428

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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 I the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $6.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE	PBD
NAME	MCMILLION, FRED BISHOP
STREET ADDRESS	1305 MCMILLION LANE
CITY-ST-ZIP	CHIPLEY, FL 32428
TITLE	CEO
NAME	MCMILLION, JOHN A BISHOP
STREET ADDRESS	3838 BLAINE DRIVE
CITY-ST-ZIP	MARIANNA, FL 32446
TITLE	BMD
NAME	HOLMES, ANNIE J PASTOR
STREET ADDRESS	692 DEERMONT CIRCLE
CITY-ST-ZIP	CHIPLEY, FL 32428
TITLE	BMD
NAME	MOORE, MILLIE MISSY
STREET ADDRESS	263 COCHRAN ROAD
CITY-ST-ZIP	CHATTAHOOCHEE, FL 32324
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/12/06-80070-008 70.00

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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 inform 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 di 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John A. McMillion Jr 5004/27/06 850 526 4572
SIGNATURE AND TYPED OR PRINTED NAME OF CHANGED OFFICER OR DIRECTOR — Date — Daytime Phone #