


FILE NOW: FILING FEE IS \$61.25

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Mar 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N50265** (0)

1. Corporation Name

DANIA HOUSE OF PRAYER, INC.

Principal Place of Business

Mailing Address

2201 GREEN STREET
STOR FRONT
HOLLYWOOD FL 33020
US

2201 GREEN STREET
STOR FRONT
HOLLYWOOD FL 33020-1200
US



2. Principal Place of Business	2a. Mailing Address
21 208 NW 7 Ct	26 208 NW 7 Ct
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Hallandale Fla	28 City & State Hallandale Fla
24 Zip 33009	29 Zip 33009
25 Country Browad	30 Country Browad

3. Date Incorporated or Qualified **08/06/1992** 3a. Date of Last Report **05/01/1996**

4. FEI Number **65-0348929** 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 ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRUCE, CLARENCE
2452 NW 80 ST
MIAMI FL 33147

clarence Bruce
208 NW 7 Ct
Hallandale Fla 33009

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 Ernestine Bruce (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUCE, CLARENCE	1.2 NAME	
STREET ADDRESS	2452 NW 80 ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCMILLAN, DENNIS	2.2 NAME	
STREET ADDRESS	1987 NW 50 ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUCE, ERNESTINE	3.2 NAME	
STREET ADDRESS	2452 NW 80 STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAY, BRUCE	4.2 NAME	
STREET ADDRESS	3101 NW 22 CT	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, DOROTHY LOIS	5.2 NAME	
STREET ADDRESS	2239 CADY STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33020	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 made an officer or director, or in an attached list with a name address.

SIGNATURE: Ernestine Bruce
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/97 (954) 454-3692
Date Daytime Phone # 0021330

CR2E037 (9/96)