

FILE NOW: FILING FEE IS \$61.25

FILED
May 21 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 # **NP3000000393**
 1. Corporation Name **Grace Church of God of Prophecy, Inc.**

Principal Place of Business Mailing Address (same)
3093 Floweva St
West Palm Beach, FL 33406

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 1-28-93	3a. Date of Last Report
4. FEI Number 65-0386183	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
Joe Ray
2565 Cedarcrest Rd.
West Palm Beach, FL 33415

10. Name and Address of New Registered Agent
 81 Name **Brian K. Ladd**
 82 Street Address (P.O. Box Number is Not Acceptable)
3083 Floweva St.
 83
 84 City **West Palm Beach** FL 85 Zip Code **33406**

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 **Brian K. Ladd, VP** DATE **5/10/97**

12. OFFICERS AND DIRECTORS

TITLE	President	<input type="checkbox"/> DELETE
NAME	Johnny F. McDaniel	
STREET ADDRESS	2910 Norway Pine Lane	
CITY-ST-ZIP	Lantana, FL 33462	
TITLE	Brian Ladd, VP	<input type="checkbox"/> DELETE
NAME	Brian Ladd, VP	
STREET ADDRESS	3083 Floweva St.	
CITY-ST-ZIP	West Palm Beach, FL 33406	
TITLE	Sec/Treas.	<input type="checkbox"/> DELETE
NAME	Joe Ray	
STREET ADDRESS	2565 Cedarcrest Rd.	
CITY-ST-ZIP	West Palm Beach, FL 33415	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	Amos Thomas	
STREET ADDRESS	413 NW 35th Avenue	
CITY-ST-ZIP	Boynton Beach, FL 33435	
TITLE	Roscoe Walkes, Director	<input type="checkbox"/> DELETE
NAME	Roscoe Walkes, Director	
STREET ADDRESS	506 Chillingworth Drive	
CITY-ST-ZIP	West Palm Beach, FL 33409	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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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 changed, or on an attachment with an address.

SIGNATURE: **Brian K. Ladd** **Brian K. Ladd, V.P.** DATE: **5/10/97** DAYTIME PHONE: **561-964-1371**

CR2E037 (9/96)