

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002166

1. Entity Name

THE HOUSE OF PRAYER EVANGELICAL AND REVELATION M

Principal Place of Business

607 25TH ST. WPLL ROAD
WEST PALM BEACH FL 33407

Mailing Address

7919 BURLWOOD LANE
LAKE WORTH FL 33467-1837

FILED

Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90029 005 ****61.25



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

North Main Street
Suite, Apt. #, etc.
305

City & State
Belle Glade FL

Zip Country
33 Palm Bch.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number
65-0417067

☒ Applied For
☒ Not Applicable

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

6. Name and Address of Current Registered Agent

BRINKLEY, TAMMATHA E
816 BOOKER AVE
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

T ☐ Delete
NAME HUDSON, VERONICA L
STREET ADDRESS 5288 STACY ST APT B
CITY-ST-ZIP WEST PALM BEACH FL 33417

D ☐ Delete
NAME BROUGHTON, CALLIE M PASTOR
STREET ADDRESS 7919 BURLWOOD LANE
CITY-ST-ZIP LAKE WORTH FL 33467

T ☒ Delete
NAME BRINKLEY, ALEX L
STREET ADDRESS 816 BOOKER AVE.
CITY-ST-ZIP WEST PALM BEACH FL 33401

T ☐ Delete
NAME JACKSON, BARBRA MINISTE
STREET ADDRESS 571 WEST 1ST STREET
CITY-ST-ZIP RIVIERA BCH FL 33404

DAS ☐ Delete
NAME BRINKLEY, TAMMATHA E
STREET ADDRESS 816 BOOKER AVE.
CITY-ST-ZIP WEST PALM BCH. FL 33401

TRUSTEE ☐ Delete
NAME ELLA M. WYATT
STREET ADDRESS 1241 10th St.
CITY-ST-ZIP West Palm Bch. FL 33401

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D ☐ Change ☒ Addition
NAME ELDER CURTIS M FLOWERS
STREET ADDRESS 513 A GreenView Terrace
CITY-ST-ZIP LAKE WHALE FL 33853

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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:

Callie M. Broughton
Signature and Typed or Printed Name of Signing Officer or Director

4-3-2000 (561) 966-9154
Date Daytime Phone #

CR2E037 (9/99)