

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 27, 2008  
Secretary of State**

DOCUMENT# N9300000549

Entity Name: AMBASSADORS FOR CHRIST, PRAISE MINISTRIES, INC.

**Current Principal Place of Business:**

2750 W. WASHINGTON ST.  
ORLANDO, FL 32805 US

**New Principal Place of Business:**

**Current Mailing Address:**

6650 WESTMONT DRIVE  
ORLANDO, FL 32835 US

**New Mailing Address:**

FEI Number: 59-3213906      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEONARD, KELVIN  
6650 WESTMONT DRIVE  
ORLANDO, FL 32835 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: LEONARD, KELVIN  
Address: 6650 WESTMONT DRIVE  
City-St-Zip: ORLANDO, FL 32835

Title: D      ( ) Delete  
Name: LEONARD, VERONICA  
Address: 6650 WESTMONT DRIVE  
City-St-Zip: ORLANDO, FL 32835

Title: D      ( ) Delete  
Name: CRAYTON, WYLECIA  
Address: 6650 WESTMONT DRIVE  
City-St-Zip: ORLANDO, FL 32835

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KELVIN E LEONARD

PAST

04/27/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date