FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

1700 OWENS AVE.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	JAL REPORT 1998	Secretary DIVISION OF CO		Secretary of State
DOCUMENT # N9300005731 (5)				
CHAPEL OF PRAYER, INC.				T TO RECORD TO A STATE COLD BEING BOOK BOOK BOOK BOOK BOOK BOOK BOOK BOO
Principal Plac	e of Business	Mailing Address		
1489 WEST 32ND STREET 1489 WEST 32ND STREET				3. Date Incorporated or Qualified
RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404				01/22/1954
				4. FEI Number Applied For 65-0671125 Not Applicable
	lace of Business	2a. Mailing Address		5. Certificate of Status Desired S8.75 Additional
Suite, Apt.	# etc	Suite, Apt. #, etc.		Fee Required
22		27		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	е	City & State		7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Country	This corporation owes or has paid the current year Intangible
24	9. Name and Address of Current		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	y. Name and Address of Current	nogistered Agent	81 Name	IV. Name and Address of New Hegisters Agent
HUGGINS, HATTIE			82 Street Ad	ldress (P.O. Box Number is Not Acceptable)
1489 WEST 32ND STREET				arous (1.6. Box Hambor 15 Hot Necopeably
RIVIERA BEACH FL 33404			83	
			84 City	FL 85 Zip Code
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 .	Signature, typed or printed name of registered agen	al and title if analysis (NOTE	Registered Agent signature reg	juired when reinstating) DATE
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	Change Addition
NAME	LOVING, DANIEL L		1.2 NAME	
STREET ADDRESS	1700 OWENS AVENUE		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	ALBANY GA 31705	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Change Addition
NAME	HUGGINS, HATTIE	L DECEME	2.1 TILLE 2.2 NAME	C Citarge C Addition
STREET ADDRESS	1489 W. 32ND STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	RIVIERA BEACH FL 33407-4		2 4 City-St-ZiP	
TITLE	TO	☐ DEL ete	3.1 TITLE	Change Addition
NAME	ALLEN, EASTER		3.2 NAME	
STREET ADDRESS	1200 WEST 35TH ST.		3.3 STREET ADDRESS	}
CITY-ST-2IP	RIVIERA BEACH FL 33404	☐ DEŁETE	3.4. CITY-ST-ZIP	Change Addition
TITLE	VD	□ Deceie	4.1 TITLE	Change Addition
NAME STREET ADDRESS	LOVING, MELVENIA J 1700 OWENS AVENUE		4. 2 NAME 4.3 Street Address	
CITY-ST-ZIP	ALBANY GA 31705		4.4 CITY-ST-ZIP	
TITLE	TD TD	DELETE	5.1 THILE	☐ Change ☐ Addition
NAME	PETERSON, IDA		5.2 NAME	
STREET ADDRESS	2101 LEOARD AVENUE		5.3 STREET ADDRESS	
CITY-ST-ZIP	ALBANY GA 31705		5.4 CITY - ST - ZIP	
TITLE	\$D	☐ DELETE	6.1 TITLE	Change Addition
NAME	LOVING, YOLANDA		6.2 NAME	

ALBANY GA CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 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 employee to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 it of anged or on an attachment with an orders.

6.3 STREET ADDRESS

0-18-0V 917-888-5179

FILED

Sep 02 1998 8:00am