2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# N94000003088

Entity Name: GREATER PRAISE AND DELIVERANCE EVANGELISTIC HOUSES OF PRAYER OF PANAMA CITY, INC.

Current Principal Place of Business:

227 CLAIRE AVE
SPRINGFIELD, FL 32404

New Principal Place of Business:

Current Mailing Address:

227 CLAIRE AVE
SPRINGFIELD, FL 32404

New Mailing Address:

FEI Number: 59-3314439 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONG, MARGARET A
3515 EAST 13TH COURT
PANAMA CITY, FL 32404 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: OVS ( ) Delete
Name: SPENCER-THOMAS, LLOYD
Address: 705 CACTUS AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: PD ( ) Delete
Name: LONG, MYRON M
Address: 3515 E. 13TH CT
City-St-Zip: PANAMA CITY, FL 32404

Title: T ( ) Delete
Name: GAINES, MYRTLE
Address: 2437 E. 11TH ST F-206
City-St-Zip: PANAMA CITY, FL 32401

Title: S ( ) Delete
Name: LONG, MARGARET
Address: 3515 EAST 13TH COURT
City-St-Zip: PANAMA CITY, FL 32404

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:

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: MARGARET LONG S 04/20/2009

Electronic Signature of Signing Officer or Director — Date