2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # N95000000580

1. Entity Name
WATCHMEN ON THE WALL PRAYER NETWORK INC.

Principal Place of Business	Mailing Address
1948 OLIVIA CIRCLE APOPKA, FL 32703 US	P.O. BOX 2213 GAINESVILLE, FL 32603-2213

04222004 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-3449784

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPBELL, TARSHA L
1948 OLIVIA CIRCLE
APOPKA, FL 32703

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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. I am familiar with and accept the obligations of registered agent.

SIGNATURE _____

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JAMISON, BETTY
STREET ADDRESS	1630 SW 39TH TERRACE
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	T
NAME	PITTS, MARY
STREET ADDRESS	7306 BRIARLYN COURT
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	C
NAME	CARTER, WILLIEMAE
STREET ADDRESS	1611 SE 12TH AVENUE
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	T
NAME	DOBY, GENEVA
STREET ADDRESS	2016 NW 31ST PLACE
CITY-ST-ZIP	GAINESVILLE, FL
TITLE	T
NAME	CAMPBELL, TARSHA L
STREET ADDRESS	1948 OLIVIA CR
CITY-ST-ZIP	APOPKA, FL 32703
TITLE	S
NAME	IRVING, GLORIA
STREET ADDRESS	1129 NE 192ND AVENUE
CITY-ST-ZIP	GAINESVILLE, FL

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04/27/04-80071-004 61.25

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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: Betty P. Jamison Betty P. Jamison - President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR