

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000838

FILED
Feb 14, 2004
Secretary of State**Entity Name:** HIGH PRAISE FAMILY WORSHIP CENTER, INC.**Current Principal Place of Business:**6180 FT CAROLINE RD
UNITS 1 AND 2
JACKSONVILLE, FL 32277**New Principal Place of Business:****Current Mailing Address:**6180 FT CAROLINE RD
UNITS 1 AND 2
JACKSONVILLE, FL 32277**New Mailing Address:****FEI Number:** 59-3197574**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAYLOR, ROBIN F
6180 FT CAROLINE RD
UNITS 1 AND 2
JACKSONVILLE, FL 32277 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:** PVTD () Delete
Name: TAYLOR, ROBIN F
Address: 5458 CATSPA W LANE
City-St-Zip: JACKSONVILLE, FL 32277**Title:** SD () Delete
Name: WILLIS, ROBIN
Address: 4060 BAROS RD, #104
City-St-Zip: JACKSONVILLE, FL**Title:** D () Delete
Name: JOHNSON, PAMELA
Address: 5458 CATSPA W LANE
City-St-Zip: JACKSONVILLE, FL 32277**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 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 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: ROBIN F TAYLOR

PVTD

02/14/2004

Electronic Signature of Signing Officer or Director_____
Date