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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003775 (2)

1. Corporation Name

LADIES PRAYER MINISTRIES, INC.



Principal Place of Business
**2675 LAKE SHORE DRIVE
ORLANDO FL 32803**

Mailing Address
**2675 LAKE SHORE DRIVE
ORLANDO FL 32803**

3. Date Incorporated or Qualified
06/07/1985

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RUSH, ANNE G
2675 LAKE SHORE DRIVE
ORLANDO FL 32803**

81 Name **BLTYHE, MARILYN R.**

82 Street Address (P.O. Box Number is Not Acceptable)
2160 CHINOOK TRAIL

83

84 City **MAITLAND**

FL

85 Zip Code **32751**

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

Marilyn R. Blythe

3/1/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **BLTYHE, MARILYN R**
STREET ADDRESS **2160 CHINOOK**
CITY-ST-ZIP **MAITLAND FL 32751**

TITLE **D** ☒ DELETE

NAME **RUSH, ANNE G**
STREET ADDRESS **2675 LAKE SHORE DRIVE**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition

1.2 NAME **JILL T. READ**
1.3 STREET ADDRESS **1005 TEMPLE GROVE**
1.4 CITY-ST-ZIP **WINTER PARK, FL 32789**

2.1 TITLE **D** ☐ Change ☒ Addition

2.2 NAME **CAROLYN GILLEAN**
2.3 STREET ADDRESS **1649 COMANCHE TRAIL**
2.4 CITY-ST-ZIP **MAITLAND, FL 32751**

3.1 TITLE **P** ☐ Change ☒ Addition

3.2 NAME **MARILYN R. BLYTHE**
3.3 STREET ADDRESS **2160 CHINOOK TRAIL**
3.4 CITY-ST-ZIP **MAITLAND, FL 32751**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marilyn R. Blythe

3/1/96

407-629-4159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)