

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2000 8:00 am
Secretary of State

09-08-2000 90004 048 ****61.25

DOCUMENT # N96000001555

1. Entity Name

THE FAMILY WORSHIP AND PRAISE CENTER, INC.

R

Principal Place of Business

Mailing Address

3725 APALACHEE PKWY
 TALLAHASSEE FL 32311

3725 APALACHEE PKWY
 TALLAHASSEE FL 32311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3386168

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLANAGAN, CYRUS F
1028 SUTOR ROAD
TALLAHASSEE FL 32311

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE:

Cyrus F. Flanagan **CYRUS F. FLANAGAN**

9-5-2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	FLANAGAN, CYRUS	
STREET ADDRESS	1028 SUTOR ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	V	<input type="checkbox"/> Delete
NAME	FLANAGAN, RHONDA	
STREET ADDRESS	1028 SUTOR ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	PRICE, ESTELLE	
STREET ADDRESS	1028 SUTOR ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	T	<input type="checkbox"/> Delete
NAME	BARBER, ^{VERNON} TREASURER	
STREET ADDRESS	1028 SUTOR ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	DEACON	<input type="checkbox"/> Delete
NAME	LANE, MICHAEL	
STREET ADDRESS	1028 SUTOR ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	Trustee	<input type="checkbox"/> Delete
NAME	HEDRINGTON, ROLAND	
STREET ADDRESS	1028 SUTOR ROAD	
CITY-ST-ZIP	TALLAHASSEE FL 32311	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

Cyrus F. Flanagan **CYRUS F. FLANAGAN**

9-5-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)