

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001555

FILED
Jul 18, 2008
Secretary of State

Entity Name: THE FAMILY WORSHIP AND PRAISE CENTER, INC.

Current Principal Place of Business:

1609 BRANCH STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

1609 BRANCH STREET
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3386168 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FLANAGAN, CYRUS F
1028 SUTOR ROAD
TALLAHASSEE, FL 32311 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: PV () Delete
Name: FLANAGAN, CYRUS
Address: 1028 SUTOR ROAD
City-St-Zip: TALLAHASSEE, FL 32311

Title: MD () Delete
Name: KIMBIG, RONALD F
Address: 63 EAST KENNEDY BLVD
City-St-Zip: EATONVILLE, FL 32751

Title: D () Delete
Name: HENSON, BARRY
Address: 3376 NORTH EAST JACKSONVILLE ROAD
City-St-Zip: OCALA, FL 34779

Title: TD () Delete
Name: FRYE, MICHAEL D
Address: 1835 DEURA DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD () Delete
Name: EWOCH, YVONNE
Address: 749 EAGLE VIEW DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

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:

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: CYRUS FLANAGAN

_____ Electronic Signature of Signing Officer or Director

PV

07/18/2008

_____ Date