

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000002702

FILED
Sep 09, 2003
Secretary of State

Entity Name: PRAYER & FAITH PRAISE CENTER, INC.

Current Principal Place of Business:

2850 FREEMONT TERR S
ST. PETERSBURG, FL 33712 US

New Principal Place of Business:

Current Mailing Address:

2600 13TH STREET SO.
ST. PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 59-3487117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WATTS, BARBARA S
2600 13TH STREET SO.
ST. PETERSBURG, FL 33705 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: VPD () Delete
Name: WATTS, BRIDGET M
Address: 247 POMPANO DR. SE, APT D
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: STD () Delete
Name: REECE, ANITA
Address: 5997 5TH STREET SOUTH
City-St-Zip: ST PETERSBURG, FL 33705

Title: PD () Delete
Name: WATTS, BARBARA S
Address: 2600 13TH ST SO
City-St-Zip: ST PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: WATTS, BRIDGET M
Address: 4101 FARGO STREET NORTH, APT. 3
City-St-Zip: SAINT PETERSBURG, FL 33714

Title: STD (X) Change () Addition
Name: REECE, ANITA
Address: 3797 37TH STREET SOUTH, #90
City-St-Zip: ST PETERSBURG, FL 33711

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: BARBARA S. WATTS

PD

09/09/2003

Electronic Signature of Signing Officer or Director

Date