

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004108

Entity Name

THE PRAYER ROOM ASSEMBLY OUTREACH MINISTRY, INC.

FILED

01 JAN -2 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3500 NORTH PEARL STREET
JACKSONVILLE FL 32206

3500 NORTH PEARL STREET
JACKSONVILLE FL 32206

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3496587

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

REINSTATEMENT DO NOT WRITE IN THIS SPACE

Jess 200

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

RONALD E. WALKER

Street Address (P.O. Box Numbers Not Acceptable)

1601 N. Pearl St.

City

Jax

FL

Zip Code

32206

WALKER, RONALD E
140 5TH STREET
JACKSONVILLE FL 32206

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

RONALD E. WALKER *Ronald Walker*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12/29/00

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	WALKER, RONALD E SR	140 WEST 5TH STREET	JACKSONVILLE FL 32206	<input type="checkbox"/>
VT	WALKER, VALENA E	140 WEST 5TH STREET	JACKSONVILLE FL 32206	<input type="checkbox"/>
S	BAILEY, ELVENER L	1282 WEST 29TH STREET	JACKSONVILLE FL 32206	<input type="checkbox"/>
T	MALONE, PATRICIA	2616 WALNUT ST	JAX FL 32206	<input type="checkbox"/>
T	MALONE, RODNEY	2616 WALNUT ST	JAX FL 32206	<input type="checkbox"/>
T	BAILEY JR, DEXTER	1282 W 29TH ST	JAX FL 32209	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		1601 N. Pearl St.	Jax FL 32206	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		1601 N. Pearl St.	Jax FL 32206	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		300003532543--7	-01/11/01--01035--023	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		****236.25	****236.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		300003532543--7	-01/11/01--01035--024	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		*****61.25	*****61.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

Ronald Walker SR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/11/00

Daytime Phone #

CR2E037 (5/00)