

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Oct 14 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N97000004401 (2)**  
1. Corporation Name  
**PRAISE-N-WORSHIP INC.**



Principal Place of Business <b>P.O. BOX 2214 BRADENTON FL 34208</b>	Mailing Address <b>P.O. BOX 2214 BRADENTON FL 34208</b>
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3. Date Incorporated or Qualified  
**08/04/1997**

4. FEI Number  
**65-0774228**

<input checked="" type="checkbox"/> Applied For
<input type="checkbox"/> Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30  Yes  No

21. Principal Place of Business Suite, Apt. #, etc.	22. Mailing Address Suite, Apt. #, etc.
23. City & State	24. City & State
25. Zip Country	26. Zip Country

9. Name and Address of Current Registered Agent  
**WASHINGTON, KEVIN  
1615 21ST EAST APT. L92  
BRADENTON FL 34208**

10. Name and Address of New Registered Agent

81 Name <b>Washington, Kevin</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>1615 21ST EAST APT. L92</b>
83
84 City <b>Bradenton</b>
85 Zip Code <b>FL 34208</b>

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: *Kevin Washington* DATE: **5/1/98**

12. OFFICERS AND DIRECTORS

TITLE <b>President</b>	<input type="checkbox"/> DELETE
NAME <b>Kevin Washington</b>	
STREET ADDRESS <b>1615 21st E Apt. L92</b>	
CITY-ST-ZIP <b>Bradenton FL 34208</b>	
TITLE <b>vice president</b>	<input type="checkbox"/> DELETE
NAME <b>Charles Traub</b>	
STREET ADDRESS <b>1206 End west</b>	
CITY-ST-ZIP <b>Palmetto, FL 34221</b>	
TITLE <b>business administrator</b>	<input type="checkbox"/> DELETE
NAME <b>Deon Owens</b>	
STREET ADDRESS <b>1708 4th Ave West</b>	
CITY-ST-ZIP <b>Palmetto, FL 34221</b>	
TITLE <b>Recording Secretary</b>	<input type="checkbox"/> DELETE
NAME <b>Rosevelt Dunbar</b>	
STREET ADDRESS <b>3003 9th Ave Dr. E 34221</b>	
CITY-ST-ZIP <b>Palmetto, FL</b>	
TITLE <b>Finance Secretary</b>	<input type="checkbox"/> DELETE
NAME <b>Melissa Dunbar</b>	
STREET ADDRESS <b>3003 9th Ave Dr. E 34221</b>	
CITY-ST-ZIP <b>Palmetto, FL</b>	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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: *Kevin Washington* DATE: **5/1/98** 941-746-6259

CR2E037 (10/97)