


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # N97000006185	
1. Entity Name PRAISE OUTREACH BIBLE STUDY CHURCH INC.	

Principal Place of Business 4305 NORTH 36TH STREET TAMPA, FL 33610	Mailing Address 4305 NORTH 36TH STREET TAMPA, FL 33610
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DO NOT WRITE IN THIS SPACE

01082004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3471993	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JACKSON, JOSEPHINE ELDER N. 15TH STREET TAMPA, FL 33612
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Josephine Jackson DATE: 01-08-2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, GLORIA PASTOR 4009 EAST LOUISIANA AVENUE TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, DORENE 3508 EAST GENESEE STREET TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HANNAH, PAMELA 2006-A MULBERRY DRIVE TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/20/04-80031-024 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Pastor Gloria Johnson DATE: 1-8-2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR