

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000134

FILED
Apr 26, 2005
Secretary of State

Entity Name: FLORIDA PRAYER NETWORK, INC.

Current Principal Place of Business:

2756 WHITMORE CT.
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

PO BOX 14017
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3486434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSEN, PAMELA L
2756 WHITMORE CT.
TALLAHASSEE, FL 32312 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: PD () Delete
Name: OLSEN, PAMELA L
Address: 2756 WHITMORE CT.
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD () Delete
Name: OLSEN, TENNEY C
Address: 2756 WHITMORE CT.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: LABREQUE, LORI
Address: 1108 RIVERSIDE RIDGE RD.
City-St-Zip: TARPON SPRINGS, FL 346888

Title: D () Delete
Name: STRINGER, JANICE
Address: 1108 RIVERSIDE RIDGE RD.
City-St-Zip: TARPON SPRINGS, FL 34688804

Title: TD () Delete
Name: SWEENEY, MAURA
Address: 3317 WATERFORD DR.
City-St-Zip: CLEARWATER, FL 34621

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LABREQUE, LORI
Address: 1108 RIVERSIDE RIDGE RD.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: D (X) Change () Addition
Name: STRINGER, JANICE
Address: 6072 KITTIWAKE
City-St-Zip: LAKE LAND, FL 33809

Title: TD (X) Change () Addition
Name: KRAUSS, FRED
Address: 3111 66TH ST SW
City-St-Zip: NAPLES, FL 34105

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: TENNEY OLSEN

SD

04/26/2005

Electronic Signature of Signing Officer or Director

Date