2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# N98000000134

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 34689

Title: D ( ) Delete
Name: STRINGER, JANICE
Address: 6072 KITTIWAKE
City-St-Zip: LAKELAND, FL 33809

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 Chapter 119, 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 C OLSEN SD 04/18/2007

Electronic Signature of Signing Officer or Director — Date