

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002203

FILED  
Sep 01, 2009  
Secretary of State

Entity Name: PRAYER PARTNERS, INC.

## Current Principal Place of Business:

3113 MONTCALM DRIVE  
JACKSONVILLE, FL 32208

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 9125  
JACKSONVILLE, FL 32208

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

MEIDE, MOSES JR.  
817 NORTH MAIN STREET  
JACKSONVILLE, FL 32202 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: D ( ) Delete  
Name: NELSON, DAISY  
Address: 3113 MONTCALM DRIVE  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D ( ) Delete  
Name: VARNADORE, SADIE  
Address: 1188 WEST 31ST STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: DAVIS, MAXINE  
Address: 1730 MOSELY STREET  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: DELIGAR, SARAH  
Address: 5735 KINLOCKE COURT  
City-St-Zip: JACKSONVILLE, FL 32219

## 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:

I hereby certify that the information supplied with this filing does not qualify 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: DAISY NELSON

PRES

09/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date