2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2006
Secretary of State

DOCUMENT# N98000004304

Entity Name: SOUTHERNMOST PRAYER AND FAITH CENTER CHURCH, INC.

Current Principal Place of Business:

729 FLEMING STREET
KEY WEST, FL

New Principal Place of Business:

Current Mailing Address:

PO BOX 1452
KEY WEST, FL 330411452

New Mailing Address:

FEI Number: 65-0888110 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

HICKS, BARNEY J PASTOR
912 ASHE STREET, APT C
KEY WEST, FL 33040 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:	T	( ) Delete
Name:	PHIFER, ROBIN	
Address:	1627-2 FLAGG COURT	
City-St-Zip:	KEY WEST, FL 33040	
Title:	T	( ) Delete
Name:	RAHMING, ROSEMARY	
Address:	908 THOMAS ST	
City-St-Zip:	KEY WEST, FL 33040	
Title:	TT	( ) Delete
Name:	RAHMING, KENNY JR	
Address:	2204 FOGARTY AVE	
City-St-Zip:	KEY WEST, FL 33040	
Title:	T	( ) Delete
Name:	SCOTT, DIANE	
Address:	G-8 GEORGE ALLAN APT	
City-St-Zip:	KEY WEST, FL	
Title:	S	( ) Delete
Name:	HICKS, KRISTINA	
Address:	912 ASHE ST APT C	
City-St-Zip:	KEY WEST, FL	
Title:	P	( ) Delete
Name:	HICKS, BARNEY J	
Address:	912 ASHE ST APT C	
City-St-Zip:	KEY WEST, FL	

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:	
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: BARNEY J HICKS PRES 09/09/2006

Electronic Signature of Signing Officer or Director — Date