

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

07-29-2008 90009047 ****20.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
90112177

DOCUMENT # N99000001183

1. Entity Name
HIGHER PRAISE CATHEDRAL INC.



Principal Place of Business
**1086 MASTERSON STREET
MELBOURNE, FL 32935**

Mailing Address
**1086 MASTERSON STREET
MELBOURNE, FL 32935**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06192008 Chg-NP CR2E037 (12/06)

4. FBI Number
59-3575184

Applied For
☐ Not Applicable

6. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

**GILMORE, JENNIFER
1086 MASTERSON STREET
MELBOURNE, FL 32935**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE _____

Filing Fee is \$61.25
Due by September 12, 2008

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

Make check payable to
Florida's Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PRESSLEY, RONNIE	NAME	
STREET ADDRESS	1088 COLEMAN STREET	STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE, FL 32935	CITY-ST-ZIP	
TITLE	V ☒ Delete	TITLE	VP ☒ Change ☐ Addition
NAME	PORTER, ALBERTINE	NAME	Jennifer Gilmore
STREET ADDRESS	2400 PALM BAY RD, APT 6	STREET ADDRESS	1086 Masterson St.
CITY-ST-ZIP	PALM BAY, FL 32907	CITY-ST-ZIP	Melbourne FL 32935
TITLE	ST ☐ Delete	TITLE	
NAME	FRENCH, TANYA	NAME	
STREET ADDRESS	1068 MATHERS STREET	STREET ADDRESS	05/03/06 01001 001 \$ 244.00
CITY-ST-ZIP	MELBOURNE, FL 32935	CITY-ST-ZIP	
TITLE	CB ☐ Delete	TITLE	
NAME	ENGLISH, SIDNEY	NAME	
STREET ADDRESS	FOUNTAINHEAD CR	STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE, FL 32935	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 files empowered.

SIGNATURE: Jennifer Gilmore **7/21/08** **259-0268**
Date Daytime Phone #

KS