

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P38871 (0)

1. Corporation Name

PRAISE HIM IN SONG MINISTRY INC.



Principal Place of Business

Mailing Address

**1204 N. OLD MILL DR.
DELTONA FL 32725**

**1204 N. OLD MILL DR.
DELTONA FL 32725**

3. Date Incorporated or Qualified
05/19/1992

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

34-1492754

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23

City & State

28

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FLETCHER, RICHARD W.
1204 N. OLD MILL DR.
DELTONA FL 32725**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and filer if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PCD
FLETCHER, RICHARD W.
STREET ADDRESS
1204 N. OLD MILL DR.
CITY-ST-ZIP
DELTONA FL

TITLE ☐ DELETE

NAME
V
ANGST, HELEN
STREET ADDRESS
130 FIFTH ST. S.E., #916
CITY-ST-ZIP
BARBERTON OH

TITLE ☐ DELETE

NAME
VCD
FLETCHER, HELEN
STREET ADDRESS
1204 N. OLD MILL DR.
CITY-ST-ZIP
DELTONA FL

TITLE ☐ DELETE

NAME
ST
FLETCHER, HELEN
STREET ADDRESS
1204 N. OLD MILL DR.
CITY-ST-ZIP
DELTONA FL

TITLE ☐ DELETE

NAME
D
CLARY, WALTER
STREET ADDRESS
154 MOSS DR.
CITY-ST-ZIP
DEBARY FL

TITLE ☐ DELETE

NAME
D
WARRS, MARY
STREET ADDRESS
889 S. CARPENTER
CITY-ST-ZIP
ORANGE CITY FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 16-1996 904-789-6053
Date Daytime Phone #

CR2E037 (12/95)