


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000050540 (9)					
1. Corporation Name PRAY ENTERPRISES, INC.					
Principal Place of Business 3726 PIZZARO RD JACKSONVILLE FL 32217-3201			Mailing Address 3726 PIZZARO RD JACKSONVILLE FL 32217-3201		
2. Principal Place of Business 21 3733 UNIVERSITY BLVD W Suite, Apt. #, etc. 22 NO. 213 City & State 23 JACKSONVILLE, FL Zip 24 32217		2a. Mailing Address 26 3733 UNIVERSITY BLVD W Suite, Apt. #, etc. 27 NO. 213 City & State 28 JACKSONVILLE, FL Zip 29 32217		3. Date Incorporated or Qualified 06/12/1996 3a. Date of Last Report INITIAL REPORT 4. FEI Number 59-3384077 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent PRAY, LAURIE L 3726 PIZZARO RD JACKSONVILLE FL 32217-3201			10. Name and Address of New Registered Agent 81 Name SAME (LAURIE L. PRAY) 82 Street Address (P.O. Box Number is Not Acceptable) 3733 UNIVERSITY BLVD W, STE 213 83 84 City JACKSONVILLE FL 85 Zip Code 32217		
11. Pursuant to the provisions of Sections 607.0502 and 607.1405, 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 607.0505, Florida Statutes. SIGNATURE <i>Laurie L. Pray</i> LAURIE L. PRAY, PRESIDENT DATE <i>4-22-97</i>					
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP			P/V/T/S (SAME) (LAURIE L. PRAY) 11674 VILLAGE LN JACKSONVILLE, FL 32223 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: <i>Laurie L. Pray</i> LAURIE L. PRAY, PRESIDENT <i>4/22/97</i> (904) 730-7500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					



CR2E034 (9/96)