

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000005221

**FILED**  
**Feb 13, 2016**  
**Secretary of State**  
**CC8571957933**

**Entity Name:** PRAYER OF SALVATION LEARNING CENTER, INC.

**Current Principal Place of Business:**

2415 EAST MAGNOLIA ST  
LAKELAND, FL 33801

**Current Mailing Address:**

P.O.BOX 286  
LAKELAND, FL 33802 US

**FEI Number: 36-4687698**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DALMAS, SPENCENA  
2415 EAST MAGNOLIA ST  
LAKELAND, FL 33801 US

*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

**Officer/Director Detail :**

Title DP  
Name DALMAS, SPENCENA  
Address P.O.BOX 286  
City-State-Zip: LAKELAND FL 33802

Title DV  
Name DAVIS, WILLIE JR  
Address P.O.BOX 286  
City-State-Zip: LAKELAND FL 33802

Title DST  
Name BUTLER, STEPHANIE  
Address P.O.BOX 286  
City-State-Zip: LAKELAND FL 33802

*I hereby 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 all other like empowered.*

**SIGNATURE: SPENCENA DALMAS**

**OWNER**

**02/13/2016**

Electronic Signature of Signing Officer/Director Detail

Date