

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011721

Entity Name: CENTER OF PRAYER MINISTRIES INC.**Current Principal Place of Business:**1116 WHITE STREET
KEY WEST, FL 33040**Current Mailing Address:**1116 WHITE STREET
KEY WEST, FL 33040 US**FEI Number:** 38-3862107**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BREVIL, MARIE C
1116 WHITE
STREET
KEY WEST, FL 33040 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:** BREVIL MARIE C

01/09/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	BREVIL, MARIE C
Address	1116 WHITE STREET
City-State-Zip:	KEY WEST FL 33040

Title	VP
Name	HYPPOLITE, STFORT
Address	1643 BRUNSON CT APT 3
City-State-Zip:	KEY WEST FL 33040

Title	D
Name	REGIS, WINISE F
Address	A2 7TH
City-State-Zip:	KEY WEST FL 33040

Title	D
Name	DIEUDONNE, PAUL
Address	2920 SEIDENBERG AVENUE
City-State-Zip:	KEY WEST FL 33040

Title	D
Name	ADOLPHE, JEAN F
Address	818 ELIZABETH STREET 9
City-State-Zip:	KEY WEST FL 33040

Title	D
Name	ANDRÉ , JEAN PHILIPPE
Address	1116 WHITE STREET
City-State-Zip:	KEY WEST FL 33040

Title	DIRECTOR
Name	SAINT-CYR, JEAN D
Address	1116 WHITE STREET
City-State-Zip:	KEY WEST FL 33040

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: MARIE C BREVIL

PRESIDENT

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date