| Current | Mailing Address: | | | |
|-----------|---|---|---|------------|
| | V FT. KING STREET , FL 34474 | | | |
| FEI Nun | nber: 16-1618915 | | Certificate of Status De | esired: No |
| Name a | nd Address of Current Registered A | Agent: | | |
| | CRYSTAL 3RD AVENUE 'L 34471 US | | | |
| The above | named entity submits this statement for the purpose o | of changing its registered office or re | egistered agent, or both, in the State of | Florida. |
| SIGNAT | URE: | | | |
| | Electronic Signature of Registered Age | ent | | Date |
| Officer/ | Director Detail : | | | |
| Title | TRUSTEE DIRECTOR | Title | DIRECTOR | |

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000010892

Entity Name: NEW GLORIOUS HOPE PRIMITIVE BAPTIST CHURCH, HOUSE OF PRAYER, INC.

Current Principal Place of Business:

1638 SW FT. KING STREET OCALA, FL 34474

| | Title | TRUSTEE, DIRECTOR | Title | DIRECTOR |
|--|-----------------|---|-----------------|---|
| | Name | BOONE, JR., THOMAS | Name | GAINES, REGINALD |
| | Address | 1638 SW FT. KING STREET | Address | 1638 SW FT. KING STREET |
| | City-State-Zip: | OCALA FL 34474 | City-State-Zip: | OCALA FL 34474 |
| | Title | DIRECTOR | Title | TREASURER, EXECUTIVE SECRETARY, DIRECTOR |
| | Name | JOHNSON, TOMMY | Name | BOONE, CRYSTAL B ` |
| | Address | 1638 SW FT. KING STREET | Address | 711 SW 23RD AVENUE |
| | City-State-Zip: | OCALA FL 34474 | City-State-Zip: | OCALA FL 34471 |
| | Title Name | SECRETARY, DIRECTOR CASSIDY, GEORGIA B | Title | ASST. SECRETARY, DIRECTOR |
| | | | Name | GAINES, MARCELLA S |
| | Address | 1638 SW FT. KING STREET | Address | 1638 SW FORT KING STREET |
| | City-State-Zip: | OCALA FL 34474 | City-State-Zip: | OCALA FL 34474 |
| | | | | |

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: CRYSTAL BOONE

TREASURER

04/21/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 21, 2023 **Secretary of State** 8705296130CC