

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000000507

Entity Name: INTERNATIONAL CELL OF PRAYER,INC**Current Principal Place of Business:**1137 EBERT ST E
LEHIGH ACRES, FL 33974**Current Mailing Address:**1137 EBERT ST E
LEHIGH ACRES, FL 33974 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGIS, SCHIGHDER SR.
1137 EBERT ST E
LEHIGH ACRES, FL 33974 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 | P |
| Name | REGIS, SCHIGHDER SR. |
| Address | 1137 EBERT ST E |
| City-State-Zip: | LEHIGH ACRES FL 33974 |

| | |
|-----------------|-----------------------|
| Title | V |
| Name | AUGUSTIN, JESULA |
| Address | 1239 DECATURE ST E |
| City-State-Zip: | LEHIGH ACRES FL 33974 |

| | |
|-----------------|-----------------------|
| Title | A |
| Name | ERNST, AUGUSTIN SR. |
| Address | 1239 DECATURE ST E |
| City-State-Zip: | LEHIGH ACRES FL 33974 |

| | |
|-----------------|-----------------------|
| Title | S |
| Name | REGIS, SCHIGHDER JR. |
| Address | 1239 DECATURE ST E |
| City-State-Zip: | LEHIGH ACRES FL 33974 |

| | |
|-----------------|--------------------------|
| Title | C |
| Name | ARCELIN, FRITZ |
| Address | 23 WESTERN PARKWAY APT 2 |
| City-State-Zip: | IR NJ 07111 |

| | |
|-----------------|------------------------|
| Title | T |
| Name | THEODORE, CLAUDY |
| Address | 2424 SANDERS PINES CIR |
| City-State-Zip: | IMMOKALEE FL 34142 |

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|-----------------|-----------------------|
| Title | RP |
| Name | REGIS, JUDE |
| Address | 1137 EBERT STREET E |
| City-State-Zip: | LEHIGH ACRES FL 33974 |

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: SCHIGHDER REGIS**SR****02/07/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date