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Apr 22 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 705147 (7)

1. Corporation Name

THE EVANGELICAL COVENANT CHURCH OF POMPANO BEACH  
FLORIDA, INC.

Principal Place of Business

Mailing Address

9904 N.W. 77TH STREET  
TAMARAC FL 33321

9904 N.W. 77TH STREET  
TAMARAC FL 33321-7401



3. Date Incorporated or Qualified  
02/04/1963

3a. Date of Last Report  
06/14/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
59-1426200

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENRY, BRUCE  
350 N.E. 42ND ST.  
FT. LAUDERDALE FL 33334

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T  
NAME: WOETZEL, CRAIG  
STREET ADDRESS: 6801 MARION CT  
CITY-ST-ZIP: N. LAUDERDALE FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
Change  Addition

*P Cunliffe, David  
9943 NW 6th Ct  
Plantation, FL*

D  
NAME: SCHULHOF, BETTY  
STREET ADDRESS: 9221 W. BROWARD BLVD.  
CITY-ST-ZIP: PLANTATION FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Change  Addition

VP  
NAME: CLAUSON, RILLA  
STREET ADDRESS: 1650 NE 55TH ST.  
CITY-ST-ZIP: FT. LAUDERDALE FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
Change  Addition

D  
NAME: VIOLA NILSEN  
STREET ADDRESS: 1295 NW 87 AVE.  
CITY-ST-ZIP: CORAL SPRINGS FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
Change  Addition

P  
NAME: FRIZEN, BERT  
STREET ADDRESS: 8931 N. NEW RIVER CANAL  
CITY-ST-ZIP: PLANTATION FL

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
Change  Addition

S  
NAME: CUNLIFFE, TERRI  
STREET ADDRESS: 9943 NW 6TH CT  
CITY-ST-ZIP: PLANTATION FL

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
Change  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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Rilla Clauson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/97  
Date

954 771-2783  
Daytime Phone # 0036910

CR2E037 (9/96)