## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998

DOCUMENT #

THE EVANGELICAL COVENANT CHURCH OF POMPANO BEACH

## **FILED** May 26 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address					s regin soru obiet Buldt sibni asan osan digil alan alah digil bidi sibni digil sibni sadi	
9904 N.W. 77TH STREET 9904 N.W. 77TH STREET						3. Date Incorporated or Qualified
TAMARAC FL 3	33321	TAMARAC FL 33321				02/04/1963
						4. FEI Number Applied For
						59-1426200 Not Applicable
2. Principal P	Place of Business	2a, Mailing Address				, 40
21		26				5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc.						6. Election Campaign Financing \$5.00 May Be
27						Trust Fund Contribution Added to Fees
City & Stat	6	City & State				7. Is this nonprofit corporation a homeowners association?
28						☐ Yes ☐ No
Zip	Country Zip Cou		intry		8. This corporation owes or has paid the current year intangible	
24	25	29	30	ō		Personal Property Tax due June 30. 🔲 Yes 🔲 No
	9. Name and Address of Curr	ent Registered Agent		227		10. Name and Address of New Registered Agent
				81	Name	
HENRY,				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
	. <b>42</b> ND St.		ļ			
ft. lau	DERDALE FL 33334			83		
	:			84	City	85 Zip Code
				$\perp$		FL   S   S   S   S   S   S   S   S   S
11. Pursuant office or r	to t <b>he</b> provisions of Sections 617.05 egi <b>ster</b> ed agent, or both, in the Sta	602 and 617.1508, Flor <b>ida Sta</b> ti te of Florida. Such change was	utes, the at authorized	oove d by	named corpo	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	im familiar with, and accept the obli	gations of, Section 617.0503, F	lorida Stat	utes		
SIGNATURE .					<del></del>	
12.	Signature, typed or printed name of registered a	Deni and little if applicable (NU ND DIRECTORS	13.	Agei	ni signalure re-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	T	DELETE	1.1 10			Change   Addition
NAME	WOETZEL, CRAIG		1.2 NA		1	JULI NEISON
STREET ADDRESS	6801 MARION CT				ADDRESS	2800 NW 56 Avenue # F304
CITY-ST-ZIP	N. LAUDERDALE FL			1.4 CITY - ST -		Lauderhill Fl 23313-2318
TITLE	D	DELETE		2.1 TITLE		☐ Change ☐ Addition
NAME	SCHULHOF, BETTY		2.2 NA		1	
STREET ADDRESS	9221 W. BROWARD BLVD.		1		ADDRESS	
CITY-ST-ZIP	PLANTATION FL		2.40			
TITLE	VP	DELETE	3.1 T/1			☐ Change ☐ Addition
NAME	CLAUSON, RILLA		3.2 NA			
STREET ADDRESS	1650 NE 55TH ST.				ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. C			
TITLE	D	DELETE	4.1 10		<del></del>	Change Addition
NAME	VIOLA NILSEN		4. 2 N	AME	-	
STREET ADDRESS	1295 NW 87 AVE.				ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL		4.4 CI		ì	İ
TITLE	P	DELETE	5.1 TIT			☐ Change ☐ Addition
NAME	CUNLIFFE, DAVID	• •	5.2 NA			· · · —
STREET ADDRESS	9943 N.W. 6TH CT				ADDRESS	
CITY-ST-ZIP	PLANTATION FL		5.4 Cn		1-7IP	
TITLE	S	☐ DELETE	6.1 10			Change Addition
NAME	CUNLIFFE, TERRI	—	6.2 NA			Ellie Seiler AChange Addition 5841 WW61 Ave, Apt201
STREET ADDRESS	9943 NW 6TH CT		1		ADDRESS	5041 NIVOITE, MPIOU
City-St-Zip	PLANTATION FL			TY-ST	- 1	Tamame, F1 23319

I 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.