FILE NOW: FILING FEE IS \$61.25

NONPROFIT **ICORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORFURATIONS

1996

DOCUMENT #
1. Corporation Name 706796

(0)

FIRST ASSEMBLY OF GOD, INC. OF LAKE PLACID, FLOR



 (x_1,\dots,x_n)

IDA	OCCUPATION OF GOD, INC.				
Principal Place	of Business	Mailing Address		(1881)) 1980) OBEID BEID PROTEITE	BINT BIBIT BIBIT BIBIT BIBET BIBIT BIBIT INBI
327 PLUMOSA LAKE PLACID		POST OFFICE BOX 477 LAKE PLACID FL:33852			
US		us 33)	52	3. Date Incorporated or Qualified 02/05/1964	3a. Date of Last Report 02/20/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number 59-2352453	Applied For Not Applicable
Suite, Apt. #	t etc	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntargible tax under s. 199.032, Yes 🔲 No
24	9. Name and Address of Currel	29 Arent	30	Florida Statutes 10. Name and Address of New Re	
	g. Idame and Address of Curren	it riegistored Agent	81 Name		
PDOWN.	WILLIAM R.		701	n ParSonS dress (P.O. Box Number is Not Acceptable	
45 WATT			82 Street Add	Le Mon Rol NG.	e,
, LAKE PL			83	7_ com // // // // // // // // // // // // //	
, 54215	NOID 1 E		04 00		PE Zin Code
			84 City	e pacidi	FL 85 Zip Code 3 3 8 5 7
11. Pursuant t	o the provisions of Sections 617.050:	2 and 617.1508, Florida Statu	tes, the above-named corpo	e Mac. As	pose of changing its registered office
or register familiar wit	ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	ida. Such change was authon tion 617,0503. Florida Statute	zed by the corporation's bo- s.	ard of directors. Thereby accept the appo	ontrnent as registered agent. I am
1		1			
SIGNATURE	Signature, typed or printed name of registered agen	t and little if applicatio (N	OTE Registered Agent signature requi		DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PDC	☐ DELETE	1.1 TUTLE	onnie wells son	Change 🙀 Addition
NAME	BRYANT, JOHNNY (REV)			200 CR 29	
STREET ADDRESS	345 PLUMOSA AVENUE		1.3 STREET ADDRESS	-4ke placed, FC. 33852	
CITY-ST-ZIP	LAKE PLACID FL	DELETE		-ake placia ite. 3383 -	Change Addition
TITLE	D NITOUELL IACK	A DECEMBER	2 1 TITLE		
NAME	MITCHELL, JACK 145 FOREVER AVE		2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS	LAKE PLACID FL		2.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	D DANE PENOID TE	[] DELETE	3 1 TITLE		Change Addition
NAME	WILSON, HOWARD		3.2 NAME		
STREET ADDRESS	1511 MULBERRY AVE.		3.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE PLACID FL		3.4. CITY - \$1 - ZIP		
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	PARSONS, TOM Le.	non	4. 2 NAME		
STREET ADDRESS	119 LEPLON RD NE		4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE PLACID FL		4.4 CITY - ST - ZIP		
TITLE	D	DELETE	5 1 TITLE	7000017 7 -04/05/96010	Change ☐ Addition
NAME	MCDANIEL, WILLIAM		52 NAME	****61.25	or the contract of the contrac
STREET ADDRESS	29 MIAMI DRIVE		5 3 STREET ADDRESS	4004U1.CJ	
CITY-ST-ZIP	LAKE PLACID FL		5.4 CITY-ST-ZIP		Chance Addising
TITLE		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		25.6
STREET ADDRESS			6.3 STREET ADDRESS		ч -
CITY-ST-ZIP			6 4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

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ACM Johnson M. By of Parties 3-96 941-465-236-3

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Check #1598 4/196