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Mar 06 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 # 709185 (3)

1. Corporation Name

CENTRAL BIBLE ASSEMBLY OF GOD, INC.



Principal Place of Business

Mailing Address

**1300 S.W. 87TH AVE.
 MIAMI FL 33174**

**1300 S.W. 87TH AVE.
 MIAMI FL 33174-3309**

3. Date Incorporated or Qualified
06/21/1965

3a. Date of Last Report
02/19/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1303132

Applied For
 Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

25 Country

28 Zip

30 Country

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

**STOCKER, DAVID H
 9880 SW 152ND TERRACE
 MIAMI FL 33157**

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

TITLE DELETE
 NAME **PD STOCKER, DAVID H REV**
 STREET ADDRESS **9880 SW 152ND TERRACE**
 CITY-ST-ZIP **MIAMI FL 33156**

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

TITLE DELETE
 NAME **SD ALLEN, WARREN**
 STREET ADDRESS **19643 NW 82 PL**
 CITY-ST-ZIP **MIAMI FL**

2.1 TITLE Change Addition
 2.2 NAME **SD ALLEN, WARREN**
 2.3 STREET ADDRESS **19643 NW 82 PL**
 2.4 CITY-ST-ZIP **Miami, FL 33015**

TITLE DELETE
 NAME **TD GADALA, CARLOS MARIA**
 STREET ADDRESS **7800 SW 96TH ST.**
 CITY-ST-ZIP **MIAMI FL**

3.1 TITLE Change Addition
 3.2 NAME **TD DEVINE, RICHARD**
 3.3 STREET ADDRESS **8261 SW 11 Terrace**
 3.4 CITY-ST-ZIP **Miami, FL 33144**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0032838

CR2E037 (9/96)