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Feb 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **732270** (4)

1. Corporation Name

LIVING HOPE COMMUNITY CHURCH, INC.



Principal Place of Business 2111 N E 36TH AVENUE OCALA FL 34470-126 US	Mailing Address 2111 N E 36TH AVENUE OCALA FL 34470-126 US
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2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Sulte, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 03/25/1975
4. FEI Number 59-1948985
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent SIMMONS, GERALD E. 1131 SE 43RD TERRACE OCALA FL 32871
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 GERALD E. SIMMONS 2/17/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD ☐ DELETE
NAME	SIMMONS, GERALD E
STREET ADDRESS	1131 SE 43RD TERRACE
CITY-ST-ZIP	OCALA FL
TITLE	D ☒ DELETE
NAME	LILLY, BETTIE
STREET ADDRESS	415 SE 22ND AVE
CITY-ST-ZIP	OCALA FL
TITLE	D ☐ DELETE
NAME	LIBBY, S
STREET ADDRESS	211 SW 29TH PLACE
CITY-ST-ZIP	OCALA FL
TITLE	D ☒ DELETE
NAME	SPARKMAN, HILDA
STREET ADDRESS	1244 NW 12TH PLACE
CITY-ST-ZIP	OCALA FL
TITLE	D ☐ DELETE
NAME	CHRISTIAN, DAVE
STREET ADDRESS	802 S.E. 30TH AVE.
CITY-ST-ZIP	OCALA FL
TITLE	D ☐ DELETE
NAME	BRICKEY, FRANK
STREET ADDRESS	383 S.E. 90TH ST.
CITY-ST-ZIP	OCALA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	ANNE NEWBORNE
2.3 STREET ADDRESS	3540 SE 24TH AVE
2.4 CITY-ST-ZIP	OCALA, FL. 34471
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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.

SIGNATURE MORRIS E. SIMMONS 2/17/98

CR2E037 (10/97)