## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

FILEL	)
Feb 09 1998	8:00am
Secretary o	f State

PENIEL	CHRISTIAN CHURCH, INC.					
Principal Place	e of Business	Mailing Address	<del></del>			IBN OIDN BIEN BIBN OIRN DIGN IDDI
\$301 GODDARD ORLANDO FL 3 US		P.O. BOX 608427 ORLANDO FL 32860-8427 US			<ul> <li>3. Date Incorporated or Qualified</li> <li>02/09/1978</li> <li>4. FEI Number</li> <li>59-1829959</li> </ul>	Applied For
2. Principal P	lace of Business Of Goddard Ave	2a. Mailing Address	6084	427	5. Certificate of Status Desired	- 60.7E
Suite, Apt.		Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
City & State 23 Or Lo		City & State	FL		7. Is this nonprofit corporation a home	_
Zip 24 328/0	Country	Zip 29 33840-848	Country 0 4	15A	This corporation owes or has paid the Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Current I	Registered Agent		T	10. Name and Address of New Regist	ered Agent
			81	Name		
RAMOS,			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
1	LLER WAY		83			
ONDAND	O FL 32825			<u> </u>		10-11 To 00-10
			84	City		FL 85 Zip Code
11. Pursuant office or re agent. I a SIGNATURE	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent.	ons of, Section 617.0503, Florid	da Statules	S,	poration submits this statement for the purp ation's board of directors. I hereby accept the	ose of changing its registered e appointment as registered
12.	OFFICERS AND I		13.	ani eignetore redo	ADDITIONS/CHANGES TO OFFICER	
TITLE	PD	☐ DELETE	1.1 TITLE			Change Addition
NAME	RAMOS, RAFAEL		1.2 NAME			
STREET ADDRESS	1000 MELLER WAY		1.3 STREET	ADDRESS		
CITY-ST-ZIP	ORLANDO FL	Del cre	1.4 CITY - S	ST-ŽIP		Change Addition
TITLE	SD Burna AMADIBEI	DELETE	2.1 TITLE			Change Addition
NAME STREET ADDRESS	Rivera, Maribel 147 Bexley Boulevard		2.2 NAME 2.3 STREET	. ADDBECC		
CITY-ST-ZIP	OCOEE FL 34761		2.4 CITY-5		<i>2</i> *	11.
TITLE	TD	DELETE	3.1 TITLE	01 2		☐ Change ☐ Addition
NAME	RODRIGUEZ, ELIU		3.2 NAME			
STREET ADDRESS	1100 SUNCREST DRIVE	!	3.3 STREET	ADDRESS		
CITY-ST-ZIP	APOPKA FL 32703	No. No.	3.4. CITY - 5	ST-ZIP		4.440
TITLE	Ţ	☐ DELE <b>TE</b>	4.1 TITLE			Change Addition
NAME	HARTLINE, PAUL		4. 2 NAME	4000000		
STREET ADDRESS	2338 WOODLEAF COURT ORLANDO FL 32837		4.3 STREET	- 1		
CITY-ST-ZIP TITLE	VPT	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change Addition
NAME	INEZ, SIERRA	<del></del>	5.2 NAME			- ·
STREET ADDRESS	9319 LARETTA DR.		5.3 STREET	ADDRESS		
CITY-ST-ZIP	ORLANDO FL		5.4 CITY-S	IT-ZIP		
TITLE		DELETE	6 1 TITLE			Change Addition

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 eport is true and accordate 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 of the receiver of trustee empowers 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 attackment with an address.

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS CITY-ST-ZIP

> 2/2/28 ( NAT 1-793 mg