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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **742626** **(5)**

1. Corporation Name

FIRST CHURCH OF GOD, INC. OF CAPE CORAL, FLORIDA

Principal Place of Business	Mailing Address
2213 COUNTRY CLUB BLVD CAPE CORAL FL 33909	2213 COUNTRY CLUB BLVD CAPE CORAL FL 33990-2577

3. Date Incorporated or Qualified: **05/01/1978**
3a. Date of Last Report: **02/19/1996**

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: **NOT APPLICABLE** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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
BROWN, BETSY 298 DILARD AVE. FT. MYERS FL 33908	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DOUGLAS, DOUG		1.2 NAME		
STREET ADDRESS	1438 SE 31ST TERR		1.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL		1.4 CITY-ST-ZIP		
TITLE	VCD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BROWN, JAMES		2.2 NAME		
STREET ADDRESS	298 DILLARD AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT MYERS FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	DANN, BETTY		3.2 NAME	SD	
STREET ADDRESS	1428 SW 50TH ST., UNIT 119		3.3 STREET ADDRESS	Hoath, Betty	
CITY-ST-ZIP	CAPE CORAL FL		3.4 CITY-ST-ZIP	1438 SE 13th St.	
TITLE	T	☐ DELETE	4.1 TITLE	Cape Coral, FL 33904	☐ Change ☐ Addition
NAME	BROWN, BETSY		4.2 NAME		
STREET ADDRESS	298 DILLARD AVE.		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL 33908		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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] Douglas L. Douglas, Chairman Jan, 23, 1997
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

(941)-574-5271
Daytime Phone # 00683267