FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 760471

(3)

BEVERLY HILLS CHURCH OF GOD, INC.										
Principal Plac	e of Business	Mailing Address				1			AR DIRR DIDII BU)
9113 RIDGE BLVD JACKSONVILLE FL 32209 US		% JOHANNE L. HOLDER 8981 CARBONDALE JACKSONVILLE FL 32208-2305			3	Date Incorporated or Qualified	30.0	Date of Last R	Report	
						"	10/16/1981		03/29/199	
21	lace of Business	2a. Mailing Address 26			4. FEI Number					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5.	Certificate of Status Desired	₩	\$8.75 / Fee Re		
City & State	в	City & State			6.	Election Campaign Financing	r-m,	\$5.00		
23 Zip	Country	28		men		ļ	Trust Fund Contribution		Added t	
		h1		untry		8.	This corporation has liability for	intangibk ∃ Yes		. 199.032,
24	9. Name and Address of Curren	29 t Registered Agent	30	ŀ		10	Florida Statutes Name and Address of New Re			
·······		Trogramma riguit		81	Name	10.	Halito and Modrops of Hely He	Siereien	- Agen	
CLEVELA	ND, RICHARD H			80		(5	0.0			
9113 RID	GE BLVD			82	Street Addre	988 (1	O. Box Number is Not Acceptal	ole) 		
JACKSONVILLE FL 32208				83						
				84	City			FL	85 Zip (Code
agent. I a	to the provisions of Sections 617.050; egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a	authorize	d by	the corporation	oration on's b	n submits this statement for the poard of directors. I hereby accept	O SECUTIO	of changing its	s registered registered
SIGNATURE .	Signature typed or printed name of registered age.	nt and title if applicable (NOT	E: Registere	d Aper	nt signature required	d when	reinstand	DATE	 	
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	3S IN 12
TITLE	DP	☐ DELETE 1.11		TLE					☐ Change	Addition
NAME	HOLDER, JOHNNIE L		1.2 NAME					•		
STREET ADDRESS	8981 CARBONDALE DR. E.		1.3 \$1		1.3 STREET ADDRESS					1
CITY-ST-ZIP	MOVOONELLE EL		1.4 CI	1.4 CITY - ST - ZIP						
TITLE	SD			2.1 TITLE					Change	Addition
NAME	THOMAS, NATHANIEL R			2.2 NAME					•	
STREET ADDRESS	816 BULLS BAY RD			2.3 STREET ADDRESS						
CITY-ST-ZIP	IAOKOONNILE EL ODOOD		2,40	2. 4 CITY - ST - ZIP						
TITLE	D			3.1 TITLE					Change	Addition
NAME	BRADFORD, CARL	RADFORD, CARL 324		3.2 NAME						1
STREET ADDRESS	8819 COMPHOR DR.		3.3 S1	TREET A	ADDRESS					
CITY-ST-ZIP	JACKSONVILLE, FL 00000		3.4. C	ITY-SI	T-ZIP					
TITLE	1D	☐ DELETE	4.1 TI	TLE				· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME	SPANN, WILLIE		4.2 N	AME						
STREET ADDRESS	2573 MINOSA CIRCLE		4.3 \$1	TREET	ADDRESS					
CITY-ST-ZIP			ITY-ST	r- ZIP						
TITLE	D	☐ DELETE	5.1 TI	TLE	Ţ				Change	Addition
NAME	ALEXANDER, LINCOLN B. 521		AME							
STREET ADDRESS	11626 BRIDGES RD.		5.3 S	TREET A	ADDRESS					Ī
CITY-ST-ZIP			5.4 CI	ITY-ST	Y-ST-ZIP					
TITLE	DVP	DELETE	6.1 TI	TLE					Change	☐ Addition
NAME	HENRY, BOBBY		6.2 N/	AME						
STREET ADDRESS	5111 DOSTIE DR SO		6.3 \$1	TREET A	ADDRESS					

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 all address.

6.4 CITY-ST-ZIP

SIGNATURE:

JACKSONVILLE FL

CURED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-97 904754 6516
Date Dayland Proce # 0008071

FILED

Jan 28 1997 8:00am

Secretary of State