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Feb 24 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 # 771160 (9)

1. Corporation Name

ALL NATIONS CHURCH OF GOD BY FAITH, INC.



Principal Place of Business

Mailing Address

3000 4TH AVE S
ST. PETERSBURG FL 33712
US

3850 9TH AVE. SO.
ST. PETERSBURG FL 33711-2109
US

3. Date Incorporated or Qualified
11/08/1983

3a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-2433685

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

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, JAMES E.
3850 NINTH AVENUE SOUTH
ST. PETERSBURG FL 33711

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 relistating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CD DELETE
NAME FLOWERS, MAJOR
STREET ADDRESS 2323 35TH STREET SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

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

TITLE P DELETE
NAME WILLIAMS, JOHNNIE L (PASTR
STREET ADDRESS 3850 NINTH AVENUE SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VD DELETE
NAME WILLIAMS, JAMES E.
STREET ADDRESS 3850 NINTH AVENUE SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD DELETE
NAME BRADLEY, DOROTHY
STREET ADDRESS 2005 28TH STREET SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

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

TITLE TD DELETE
NAME DAVIS, B. G.
STREET ADDRESS 1835 27TH STREET SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

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

TITLE T DELETE
NAME WELLS, WAYNE
STREET ADDRESS 317-41ST STREET SOUTH
CITY-ST-ZIP ST. PETERSBURG FL

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:

Johnnie Lee Williams, Johnnie Lee Williams 2-17-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

91-22e 327-21 05 Phone # 0050824

CR2E037 (9/96)