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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04901

1. Corporation Name
THE TRUE LIGHT PENTECOSTAL CHURCH, INC.

Principal Place of Business
112 PEMBROOK AVENUE
INTERLACHEN FL 19133
US

Mailing Address
2530 N 4TH ST
PHILADELPHIA PA 19133
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

08/29/1984

4. FEI Number
59-2520444

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

9. Name and Address of Current Registered Agent

KEYSER, TIMOTHY
OLD GAINESVILLE HWY & LONG AVE, POB 92
INTERLACHEN FL 32048

10. Name and Address of New Registered Agent

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GONZALEZ, LOUIS
STREET ADDRESS 236 W. MANHEIM STREET
CITY-ST-ZIP PHILADELPHIA PA DELETE

TITLE TD
NAME ORTIZ, ROMON
STREET ADDRESS 3714 N. 7 STREET
CITY-ST-ZIP PHILADELPHIA PA DELETE

TITLE VD
NAME LOPEZ, BENJAMIN
STREET ADDRESS 2708 FAIRHILL ST
CITY-ST-ZIP PHILADELPHIA PA DELETE

TITLE TM
NAME MALDONADO, EDDIE
STREET ADDRESS 6535 SOULDER ST
CITY-ST-ZIP PHILADELPHIA PA DELETE

TITLE S
NAME DIAZ, MIGUEL
STREET ADDRESS 5224 RISING SUN AVE
CITY-ST-ZIP PHILADELPHIA PA DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP DELETE

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
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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)(l), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Lois Lopez Gonzalez Feb 24/99
Date Daytime Phone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)