

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N17738** (8)

1. Corporation Name

PRAISE CATHEDRAL, CHURCH OF GOD, INC.



Principal Place of Business % MICHAEL J. THOMAS 4371 76TH AVE NO PINELLAS PARK FL 33781 US	Mailing Address % MICHAEL J. THOMAS 4371 76TH AVE NO PINELLAS PARK FL 33781 US
--	--

3. Date Incorporated or Qualified
11/12/1986

4. FEI Number
59-2789116

Applied For
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

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

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

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
☐ Yes ☒ No

9. Name and Address of Current Registered Agent THOMAS, MICHAEL J 5533 81ST TERR NO PINELLAS PARK FL 33781	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 agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D ☐ DELETE
NAME	REINHART
STREET ADDRESS	1159 45TH AVE NE
CITY-ST-ZIP	ST PETERSBURG FL
TITLE	D ☐ DELETE
NAME	SHIELDS, STEPHEN
STREET ADDRESS	12701 FRANK DR N
CITY-ST-ZIP	SEMINOLE FL
TITLE	D ☐ DELETE
NAME	HANGES, JOHN
STREET ADDRESS	3945 TALAH DR
CITY-ST-ZIP	PALM HARBOR FL
TITLE	D ☒ DELETE
NAME	ROGERS, RICHARD
STREET ADDRESS	5452 45TH AVE NORTH
CITY-ST-ZIP	ST. PETERSBURG FL
TITLE	D ☐ DELETE
NAME	SWAFFORD, CARL
STREET ADDRESS	4330 81ST AVE NORTH
CITY-ST-ZIP	PINELLAS PARK FL
TITLE	D ☐ DELETE
NAME	THOMAS, MICHAEL
STREET ADDRESS	5533 81ST TERRACE, NORTH
CITY-ST-ZIP	PINELLAS PARK FL

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	Rockwell, Jim
4.3 STREET ADDRESS	2296 60th ST N
4.4 CITY-ST-ZIP	ST PETERSBURG FL 33710
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Richard E. Thomas* 1-30-98 813-544-3293
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0044371

CR2E037 (10/97)