

FILE NOW! FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # N26357 (6)
1. Corporation Name

**NEW TESTAMENT CHURCH OF OUR LORD AND SAVIOR JESU
S CHRIST, INC.**

Principal Place of Business: **C/O ROOSEVELT COOPER
4108 NORTH 22ND STREET
TAMPA FL 33610**
Mailing Address: **C/O ROOSEVELT COOPER
4108 NORTH 22ND STREET
TAMPA FL 33610**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/10/1988** 3a. Date of Last Report: **05/01/1994**
4. FEI Number: **26-5843431** 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**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 [] 22 [] 23 [] 24 []
2a. Mailing Address: 26 [] 27 [] 28 [] 29 [] 30 []
Suite, Apt. #, etc.: 21 [] 22 []
City & State: 23 [] 24 []
Zip: 24 [] Country: 25 [] Zip: 29 [] Country: 30 []

9. Name and Address of Current Registered Agent
**COOPER, ROOSEVELT
4108 NORTH 22ND STREET
TAMPA FL 33610**

10. Name and Address of New Registered Agent
81 Name: []
82 Street Address (P.O. Box Number is Not Acceptable): []
83 []
84 City: [] 85 Zip Code: **FL** []

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer, 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 607.0505, 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: **D**
NAME: **COOPER, ROOSEVELT**
STREET ADDRESS: **4108 N. 22ND STREET**
CITY - ST - ZIP: **TAMPA FL**
TITLE: **D**
NAME: **COOPER, BEVERLY**
STREET ADDRESS: **4108 N. 22ND STREET**
CITY - ST - ZIP: **TAMPA FL**
TITLE: **D**
NAME: **WILLIAMS, LILLI**
STREET ADDRESS: **1799 RUSSELL ST., #1**
CITY - ST - ZIP: **ST. PETERSBURG FL**
TITLE: **D**
NAME: **PETTIS, DOROTHY**
STREET ADDRESS: **4800 15TH AVENUE S.**
CITY - ST - ZIP: **ST. PETERSBURG FL**
TITLE: []
NAME: []
STREET ADDRESS: []
CITY - ST - ZIP: []
TITLE: []
NAME: []
STREET ADDRESS: []
CITY - ST - ZIP: []

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: [] Change Additio
1.2 NAME: []
1.3 STREET ADDRESS: []
1.4 CITY - ST - ZIP: []
2.1 TITLE: [] Change Additio
2.2 NAME: []
2.3 STREET ADDRESS: []
2.4 CITY - ST - ZIP: []
3.1 TITLE: [] Change Additio
3.2 NAME: []
3.3 STREET ADDRESS: []
3.4 CITY - ST - ZIP: []
4.1 TITLE: [] Change Additio
4.2 NAME: []
4.3 STREET ADDRESS: []
4.4 CITY - ST - ZIP: []
5.1 TITLE: [] Change Additio
5.2 NAME: []
5.3 STREET ADDRESS: []
5.4 CITY - ST - ZIP: []
6.1 TITLE: [] Change Additio
6.2 NAME: []
6.3 STREET ADDRESS: []
6.4 CITY - ST - ZIP: []

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **ROOSEVELT COOPER** [Signature] Date: **04/28/96**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone: **400001847084**
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