

FILE NOW: FILING FEE IS \$61.25

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Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N39680** (6)

1. Corporation Name

THE ORIGINAL TABERNACLE OF PRAYER FOR ALL PEOPLE, INC.



Principal Place of Business

Mailing Address

C/O VERONICA ALEXANDER
163 W. 20TH STREET
RIVIERA BEACH FL 33404
US

C/O VERONICA ALEXANDER
P.O. BOX 10201
RIVIERA BEACH FL 33419
US

3. Date Incorporated or Qualified

08/08/1990

4. FEI Number

65-0191415

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 C/o Shannon Hawkins

26 C/o Shannon Hawkins

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 163 W. 20th Street

27 P.O. Box 10201

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

City & State

City & State

23 Riviera Beach, Fl.

28 Riviera Beach, Fl.

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

Zip

Country

Zip

Country

24 33404

25 US

29 33419

30 US

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

10. Name and Address of New Registered Agent

VERONICA ALEXANDER
4852 ORLEANS CT-APT D
WEST PALM BEACH FL 33415

81 Name Shannon Hawkins

82 Street Address (P.O. Box Number is Not Acceptable)
1113 35th St.

83

84 City West Palm Beach

FL

85 Zip Code 33407

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

Shannon Hawkins

4/22/98

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

A
NAME BOGIER, LAWRENCE
STREET ADDRESS 801 S CLAIBORNE STREET
CITY-ST-ZIP GOLDSBORO NC

1.1 TITLE ☐ Change ☒ Addition

D
NAME Shannon Hawkins
STREET ADDRESS 1113 35th St.
CITY-ST-ZIP West Palm Beach, Fl. 33407

TITLE ☐ DELETE

P
NAME WILLIAMS, HAYWOOD
STREET ADDRESS 142 E 23RD ST
CITY-ST-ZIP RIVIERA BEACH FL

2.1 TITLE ☐ Change ☒ Addition

D
NAME Linda Lloyd
STREET ADDRESS 4920 Sand dune Cir.
CITY-ST-ZIP West Palm Beach, Fl. 33417

TITLE ☐ DELETE

D
NAME JAMES, MARCEL
STREET ADDRESS 5819 E. BERMUDA CIRCEL
CITY-ST-ZIP WEST PALM BEACH FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

D
NAME EDDY JEAN WILLIAMS
STREET ADDRESS 142 E. 23RD ST.
CITY-ST-ZIP RIVIERA BCH. FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☒ DELETE

D
NAME ALEXANDER, VERONICA
STREET ADDRESS 521 W. 27TH STREET
CITY-ST-ZIP WEST PALM BEACH FL

5.1 TITLE ☐ Change ☐ Addition

TITLE ☒ DELETE

D
NAME EDWARDS, OCTAVIUS
STREET ADDRESS 8502 SUNSET
CITY-ST-ZIP PALM BEACH GARDENS FL

6.1 TITLE ☐ Change ☐ Addition

14. I 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 in an attachment with an address.

SIGNATURE: *Shannon Hawkins*

4/22/98

561-882-8262

CR2E037 (10/97)