FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N45151** **(0)**

1. Corporation Name

GOLDEN GATE CHRISTIAN CHURCH, INC.

Principal Place of Business	Mailing Address
3161 SANTA BARBARA BLVD NAPLES FL 33999 US	3161 SANTA BARBARA BLVD NAPLES FL 33999 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/13/1991**

3a. Date of Last Report: **05/01/1994**

4. FEI Number: **65-0288686** ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)

2a. Mailing Address (26)

Suite, Apt. #, etc. (22) (27)

City & State (23) (28)

Zip (24) Country (25) Zip (29) Country (30)

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 § 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GALLOWAY, BOBBY
4708 VIA CARMEN
NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name: **JANE HOPE HEWITT**

82 Street Address (P.O. Box Number is Not Acceptable): **3161 SANTA BARBARA BVD**

83

84 City: **NAPLES,** **FL** 85 Zip Code: **33999**

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 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 607.0505, Florida Statutes.

SIGNATURE: Jane Hope Hewitt **JANE HOPE HEWITT** **4-29-95**

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	D	11 TITLE	TRUSTEE	☒ Change ☐ Addition
NAME	GALLOWAY, BOBBY	12 NAME	ROBERT J. CONCRECODE	
STREET ADDRESS	4708 VIA CARMEN	13 STREET ADDRESS	1319 10TH ST. N.	
CITY-ST-ZIP	NAPLES FL	14 CITY-ST-ZIP	NAPLES FL 33940	
TITLE	D	21 TITLE	TRUSTEE	☒ Change ☐ Addition
NAME	DRACE, NAT	22 NAME	TOM HOWELL	
STREET ADDRESS	10353 WINTER VIEW DRIVE	23 STREET ADDRESS	1708 KINGS LAKE BLVD., #201	
CITY-ST-ZIP	NAPLES FL	24 CITY-ST-ZIP	NAPLES, FL 33962	
TITLE	D	31 TITLE	TRUSTEE	☒ Change ☐ Addition
NAME	MURPHY, RUSTY	32 NAME	KEN MATTHEWS	
STREET ADDRESS	2091 WILSON BLVD	33 STREET ADDRESS	4259 23RD PLACE SW	
CITY-ST-ZIP	NAPLES FL	34 CITY-ST-ZIP	NAPLES, FL 33999	
TITLE		41 TITLE	SECRETARY/TREASURER	☒ Change ☐ Addition
NAME		42 NAME	JANE HOPE HEWITT	
STREET ADDRESS		43 STREET ADDRESS	3161 SANTA BARBARA BLVD	
CITY-ST-ZIP		44 CITY-ST-ZIP	NAPLES FL 33999	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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: **JANE HOPE HEWITT, TREAS** Jane Hope Hewitt 4/29/95 **813-353-6999**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0043070