## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # N4

N49875

(0)

AUBURN ASSEMBLY OF GOD OF CRESTVIEW, INC.												
Principal Place of Business				Mailing Address					184011   181011   181011   181011   181011   181011   181011   181011   181011   181011   181011   181011	I P I VIII <b>T</b> I I	II OPDII DIÇRI DIRIJ DI	IBI) <b>Viç</b> il <b>ilç</b> i
8144 HIGHWAY 85 NORTH CRESTVIEW FL 32536 US				6144 HIGHWAY 85 NORTH CRESTVIEW FL 32536 US					3. Date incorporated or Qualifi 07/13/1992 4. FEI Number	ed		pplied For
2. Principal Place of Business				2a. Mailing Address					59-2245018			t Applicable
21				26					5. Certificate of Status Desired		\$8.75 / Fee Re	quired
Suite, Apt. #, etc.				Suite, Apt. #, etc.				•	6. Election Campaign Financin		\$5.00	
City & State				City & State					Trust Fund Contribution  7. Is this nonprofit corporation	<del>=</del> -	Added to	
23			28	<del>-</del>				1	Yes K No			
<b>Z</b> ip	Zip Country			Zip Cou			,		8. This corporation owes or ha	has paid the current year Intangible		
24	25 29			30					Personal Property Tax due June 30. Yes 😿 No			
	9. Name	and Address of Current	Regis	itered Agent		81	Name		D. Name and Address of New	Register	ed Agent	
SENN, WILLIAM CARROLL									····			
6144 HIGHWAY 85 NORTH						82 Street Address (P.0			(P.O. Box Number is Not Acce	otable)		
CRESTVIEW FL 32538						83						
						84 City				F	85 Zip	Code
11. Pursuant I	to the provisi	ons of Sections 617.0502	and 6	17.1508, Florida Statut	es, the a	bove	e-named	d corpora	tion submits this statement for t	ne purpos	e of changing it	s registered
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 .	Clanalius hand	or printed name of registered agen	and sille	H anglineble HAT	E. Doelster		ant alabate	to reculed u	hen reinstating)	DAT		]
12.	Signature, typoo		IRECTORS 13.			BEIL BRUTBICA	e required w	ADDITIONS/CHANGES TO O			IS IN 12	
TITLE	PD			DELETÉ 1.1 TI				T <sub>D</sub>			☐ Change	Addition
NAME	SENN, V	MILLIAM CARROLL			1.21	IAME		1 -	RALL, SHELTON	F.		
STREET ADDRESS				1.3 ST/			ADDRESS		5315 FOUR LAKE DR.			
CATY-ST-ZIP	CRESTY	1EW FL	·- · · · · · · · · · · · · · · · · · ·				ST-ZIP		STVIEW, FL			
TITLE	D			☐ DELETE	2.11	ITLE		D			Change	K Addition
NAME	HUBBARD, CHARLIE O JR			2.2 N				SHA	SHANK, LEON			
STREET ADDRESS	0.1450.51						ADDRESS		3 HORNE HOLLOW	RD.		i
CITY-SY-ZIP	BAKER	rl					ST-ZIP		STVIEW, FL		Change	Addition
TITLE	D VANDES	SCORD OF ALROS II						D			Citaling	KT WOOMON
NAME STREET ADORESS	VANDERFORD, CLAUDE H s 4933 OKALOOSA LANE			32N			ADORESS		CHEM, JERRY			
	CRESTVIEW FL								6 CRICKET LANE			
CITY-ST-ZIP TITLE	D D			DELETE 4.1 TI			ST-ZIP	CRE	STVIEW, FL		Change	Addition
NAME	EASTLACK, HOWARD			**		4. 2 NAME						
STREET ADDRESS		)X 77A N/A					ADDRESS	]				
					9			İ				
CITY-ST-ZIP TITLE	LAUREL HILL FL			☐ DELETE		4.4 CITY-ST-ZIP 5.1 TITLE		<del> </del>			Change	Addition
NAME						IAME		]				
STREET ADDRESS							ADDRESS	1				
CITY-ST-ZIP							T-ZIP					
TITLE				DELETE		TLE	411	†			Change	Addition
NAME						LAME						

14. Thereby 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 on an attachment with an address.

STREET ADDRESS

CITY-ST-ZIP

William C. Senn

6.3 STREET ADDRESS

02/18/98

850-682-6357

**FILED** 

Feb 24 1998 8:00am

Secretary of State

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