## 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

TITLE

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

**GAINES, JEANETTE L** 

5979 NW 29TH ST

SUNRISE FL 33313

**2240 NW 23RD LANE** 

FT. LAUDERDALE FL

SMITH, ALPHONSO

4170 NW 21 AVE, APT J201

KELLY, ROBBIE

DOCUMENT #

N93000001493 (6)

## **FILED** May 22 1998 8:00am Secretary of State

Change

Change

Change

Addition

Addition

Addition

C.	IFE MINISTRIES CHURCH	OF THE LIVING GOD,	IN 							
Principal Plac	e of Business	Mailing Address					a confessi din ining sisti nasil di		#83 HUH 81846	10100 (1) 1001
2487 N.W. 21ST STREET FORT LAUDERDALE FL 33311		4040 N.E. 6TH AVENUE POMPANO BEACH FL 33064				3. Date Incorporated or Qualified  03/31/1993  4. FEI Number  Applied For				
2. Principal P	lace of Business	2a. Mailing Address	Mailing Address				65-0405145			lot Applicable Additional
21		26			5. C	Certificate of Status Desired			Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be				
22		27				Trust Fund Contribution Added to Fees				
City & State	9	City & State	<b>⊢</b> '			7. Is	7. Is this nonprofit corporation a homeowners association?  Yes V No			
Zip	Country	Zip	Zip Co			8. T	8. This corporation owes or has paid the current year Intangible			ntangible
24	25	29	30			P.	ersonal Property Tax due J	une 30.	☐ Yes _[	□ No
9. Name and Address of Current Registered Agent					Name	10. N	10. Name and Address of New Registered Agent			
4040 N.E POMPAN	CURTIS T  OR OF THE STATE OF TH	IIPR YOSTOR			City e-named the corp		Mille	FL	•   `	its registered s registered
12. OFFICERS AND DIRECTORS			13.	,			DITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 12.
TITLE	PD	DELETE	<b>/</b> 111	lit)					Change	Addition
NAME	MILLER, CURTIS T		1.2 N	AME		Alice	Rieo 10910 E miami fl	NW		į
STREET ADDRESS	4040 NE 6TH AVE		1.3 \$	TREET	ADDRESS	14 AV.	E MiAMI FI	32215	)	)
CITY-ST-ZIP	POMPANO BEACH FL 33064			ITY - S	T-ZIP	DIRETO	K	دروره		
TITLE	D DELETE			2.1 TITLE					Change	Addition
NAME	MILLER, FAYE		2.2 N	AME						
STREET ADDRESS	4040 NE 6TH AVE		2.3 S	TREET	ADDRESS					
CITY-ST-ZIP				ZITY-S	ST-ZIP					
TITLE	D	DELETE	3.1 T	TLE	į				Change	Addition
NAME	THIGPEN, FRANCES		3.2 N	AME	-					
STREET ADDRESS	5967 NW 74 TERR		3.3 S	TRÉET	ADDRESS					ļ
CITY-ST-ZIP	PARKLAND FL		3.4. (	CITY - S	ST-ZIP					

FT LAUDERDALE FL 6.4 CITY-ST-ZIP 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

41 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

4-18-98

DELETE

DELETE

DELETE