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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

N94000003753 (0)

LAUDERDALE LAKES HOLINESS CHURCH OF GOD, INC.

1611 N.W. 38TH AVENUE LAUDERHILL FL 33313

Principal Place of Business

Mailing Address

1827 N.W. 38TH AVENUE LAUDERHILL FL 33311-4118

FILED May 01 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified	3a. Date of Last R			
						07/28/1994	10/04/199	<i>5</i> 0		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For			
21		26				65-0524676	No.	t Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8.75 / Fee Re			
City & State)	City & State				6. Election Campaign Financing	\$5.00	Mav Be		
23		28	1			Trust Fund Contribution	Added 1			
Zip	Country	Zip	Cou	intry		8. This corporation has liability for in	ntangible tax under s	. 199.032,		
24	25 29 30					Florida Statutes Yes No				
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Rec	Jistered Agent			
				81	Name	+ 4s _a				
PARKES, MARJORIE				82 Street Address (P.O. Box Number is Not Acceptable)						
	LM HILL DRIVE.		*			62. Street Address (P.O. box Number is Not Acceptable)				
APT G-17			63			· · · · · · · · · · · · · · · · · · ·	·			
	ALM BEACH FL 33415					<u> </u>				
WEGI I	ALM BEACHTE 00410			84	City		FL 85 Zip	Code		
11 Ourcuant	o the provisions of Sections 617 0502	and 617 1508 Florida Statute	e the	hove-r	named cor	poration cultimits this statement for the n		e registered		
office or n	egistered agent, or both, in the State o	f Florida. Such change was a	uthorize	d by th	he corpora	poration submits this statement for the protion's board of directors. I hereby accept	t the appointment as	registered		
agent I a	m familiar with, and accept the obligati	ions of, Section 617.0503, Flo	orida Stat	tutes.		¥ '				
SIGNATURE _										
12.	Signature, typed or printed name of registered agent OFFICERS AND		:: Hegistere	Ø Agent	signature requ	ired when reinstating) ADDILIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTOR	S IN 10	66	
TITLE	PD	DELETE	1.1 1	TIE		A DEMONSTANCES TO OFFICE	Change	Addition	(96/6)	
NAME	PARKES, KEITH		1.2 N				Presi Control Ro	Pidoteon		
	and the second s					Joyce me neil			R2E037	
STREET ADDRESS	TAMOS BALLA DEAGLE EL AGAJE			YREET AD	1.4	30 multicourt 40	uda 333	<i>))</i>	Щ	
CITY-ST-ZIP				TY-\$1-	⁷¹⁰ 31	or kavalerable to			Ķ	
TITLE	VPD	DELETE	211		17		Change	Addition	ľ	
NAME	FISHER, VERONICA		2.2 N			RLENE B. ELLIOTT				
STREET ADDRESS	6111 N.W. 72ND WAY			TREET AC	(A)	510 N.W. 52 nd AVE		-	ĺ	
CITY-ST-ZIP				2. 4 CITY-ST-ZIP		LAWDERHILL	<u> </u>			
TITLE	SO	DELETE	DELETE 3.1 TIT			ENEVIA EDWARDS	Change	Addition	i	
NAME	PARKES, MARJORIE		3.2 N	AME	7.		-1111			
STREET ADDRESS	5070 PALM HILL DRIVE		3.8 \$	treet ad	,	400 SW 12 ST, #		_		
CITY-ST-ZIP	WEST PALM BEACH FL 33415		3.4. 0	CITY-ST-	ZIP N	10: LAUDERDALE, FL	33068-40	10		
TOTLE	Ť	DELETE	4.1 TI	ITLE	ŀν	QT . \circ	Change	Addition		
NAME	SNELL, MARY		4.2 N	AME		Bashana me W	Charlet			
STREET ADDRESS	1827 N.W.38TH AVENUE		4.3 \$	TREET AD	Odress '	10.43 AL IN: 15.7.	10.			
CITY - ST - ZIP	LAUDERHILL FL 33313		4.4 C	ny-st-	ZIP -	H KON of 49#	33311			
TITLE	D	DELETE	5.1 Ti	ITLE		M		☐ Addition	ĺ	
NAME	GREEN, VINCENT		5.2 N	AME	اج ا	Háceu Campbell			ĺ	
STREET ADDRESS	1827 N.W. 38TH AVENUE		5.3 \$	5.3 STREET ADDRESS		400 300 1254 #114	D		ł	
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TITLE		DELETE	61 T		T Č	A	Change	Addition	ĺ	
NAME			6.2 N			outwide X	mill	-	ĺ	
STREET ADDRESS				TREET AC	OORESS	1657 0-21 34	5000	_	ĺ	
CITY-ST-ZIP			- 1	ITY-ST	- 1	ma ami dea	25766	· ·	i	
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4. I do 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 on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECT

4-20-97

954 139-0934 Delytime Phone + 0034700