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Jun 28, 1999 8:00 am
Secretary of State

06-28-1999 90003 046 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000007218

1. Corporation Name

CHURCH OF GOD OF PROPHECY - SUNRISE/LAUDERHILL, INC.

580327-90003-46

DEPARTMENT OF STATE

Principal Place of Business

5486 NW 19TH ST
LAUDERHILL FL 33313

Mailing Address

5486 NW 19TH ST
LAUDERHILL FL 33313



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12/29/1997

4. FEI Number

65-0802195

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

LITTLE, DERRICK
9330 NW 38 PLACE
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81

Name

Michael Shaw

82

Street Address (P.O. Box Number is Not Acceptable)

83

2960 NW 44th Ave

84

City

Lauderdale Lakes

FL

85

Zip Code

33313

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

Michael Shaw

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

(NOTE: Registered Agent signature required when reinstating)

6/2/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
LITTLE, DERRICK
STREET ADDRESS
9330 NW 38 PL
CITY-ST-ZIP
SUNRISE FL 33351

TITLE ☐ DELETE

NAME
BROWN, DIONNE
STREET ADDRESS
4201 NW 41 AVE
CITY-ST-ZIP
LAUDERHILL FL 33313

TITLE ☐ DELETE

NAME
SHAW, MICHAEL
STREET ADDRESS
3251 GLENDALE BLVD.
CITY-ST-ZIP
FT. LAUDERDALE FL 33157

TITLE ☐ DELETE

NAME
LITTLE, PAULINE
STREET ADDRESS
9330 NW 38 PL
CITY-ST-ZIP
SUNRISE FL 33351

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1

1.1 TITLE ☐ Change ☐ Add

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Mildred Bagaloe
3931 NW 32 Ave
Lauderdale Lakes FL 33309

2.1 TITLE ☐ Change ☐ Add

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Add

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
SHAW Michael
2960 NW 44th Ave
Lauderdale Lakes FL 33313-1

4.1 TITLE ☐ Change ☐ Add

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Add

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Add

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Michael Shaw 6/2/99