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Apr 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **715043** (6)

1. Corporation Name

FIRST ASSEMBLY OF GOD, INC., OF THE CITY OF BOCA RATON, STATE OF FLORIDA

Principal Place of Business

Mailing Address

**1300 NW 4TH AVE
BOCA RATON FL 33432**

**1300 NW 4TH AVE
BOCA RATON FL 33432**



3. Date Incorporated or Qualified

07/31/1968

4. FEI Number

59-1891559

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21
Suite, Apt. #, etc.

26
Suite, Apt. #, etc.

22
City & State

27
City & State

23
Zip Country

28
Zip Country

24
Country

29
Country

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. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CLOYD, LESLIE G
1551 FORUM PLACE
BUILDINGS 200 & 400
WEST PALM BEACH FL 33402**

81 Name

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

83

84 City

FL

85 Zip Code

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

Mark D. Boykin

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PC**
STREET ADDRESS **BOYKIN, MARK D**
CITY-ST-ZIP **1308 NW 2ND CIRCLE
BOCA RATON FL 33432**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition
Mark D. Boykin

TITLE ☐ DELETE
NAME **TTR**
STREET ADDRESS **AMANN, DEAN**
CITY-ST-ZIP **4072 NW 62ND LANE
CORAL SPRINGS FL 33067**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME **STR**
STREET ADDRESS **ENNIS, ALLEN**
CITY-ST-ZIP **330 NW 5 AVENUE
BOCA RATON FL**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME **TR**
STREET ADDRESS **CASTRO, LUIS**
CITY-ST-ZIP **9320-C SW 61ST WAY
BOCA RATON FL 33428**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME **TR**
STREET ADDRESS **SENA, WESTMAN**
CITY-ST-ZIP **2983 DOLPHIN DR
DELRAY BEACH FL**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 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:

Mark D. Boykin

*Senior Pastor
Mark D. Boykin*

4-1-98

54 391-2172

CR2E037 (10/97)