FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**	FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N19400

1. Corporation Name

GOSPEL ARENA OF FAITH, INC.

Principal Place of Business	Mailing Address
613 N.W. 3RD AVENUE FT. LAUDERDALE FL 33311 US	P.O. BOX 5086 FT. LAUDERDALE FL 33310 US

2. Principal Place of Business 21	2a. Mailing Address 26 *613 NW 3rd AVENUE*		3. Date Incorporated or Qualifed 02/24/1987
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27		4. FEI Number 65-0000692 / Applied For / Not Applicable
City & State 23	City & State 28 *FORT LAUDERDALE, FL*		5. Certifcate of Status Desired ☒ / $8.75 Additional Fee Required
Zip 24 / Country 25	Zip 29 *33311* / Country 30 *BROWARD*		6. Election Campaign Financing Trust Fund Contribution ☐ / $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent	
RAWLS, CORNELIUS 613 N.W. 3RD AVENUE FT. LAUDERDALE FL 33311	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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE **PD** NAME **THOMPSON, THOMAS GEORGE** STREET ADDRESS **613 N.W. 3RD AVENUE** CITY-ST-ZIP **FT. LAUDERDALE FL 33311**	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **SD** NAME **THOMPSON, GEORGE, JR.** STREET ADDRESS **613 N.W. 3RD AVENUE** CITY-ST-ZIP **FT. LAUDERDALE FL 33311**	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **VPD** NAME **DUDLEY, CLYDE** STREET ADDRESS **613 N.W. 3RD AVENUE** CITY-ST-ZIP **FT. LAUDERDALE FL 33311**	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE **D** NAME **RAWLS, CORNELIUS** STREET ADDRESS **613 N.W. 3RD AVENUE** CITY-ST-ZIP **FT. LAUDERDALE FL 33311**	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (11/98)

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, with all other like empowered.

SIGNATURE: _____   *2-4-99*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #