

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90155 001 ****61.25

DOCUMENT # F98000001977

1. Corporation Name

SANCTUARY CHURCH OF THE OPEN DOOR, INC.

Principal Place of Business
5923-41 WALNUT ST
PHILADELPHIA PA 19139

Mailing Address
5923-41 WALNUT ST
PHILADELPHIA PA 19139



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

04/07/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

23-7442379

Applied For

Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip

Country

Zip

Country

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILSON, LAFAWN
425 CRESCENT DR
LAKE PARK FL 33408

81. Name

LaFawn Wilson

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

4857 Northlake Blvd.

83.

84. City

West Palm Beach

FL

85. Zip Code

33418

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 *LaFawn Wilson, Bishop*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CP ☐ DELETE

NAME BRONSON, AUDREY F BISHOP

STREET ADDRESS 1601 N. 72ND ST
PHILADELPHIA PA 19151

CITY-ST-ZIP VCVS ☐ DELETE

TITLE CARLTON, BECKY M DR

NAME 1601 N. 72ND ST

STREET ADDRESS PHILADELPHIA PA 19151

CITY-ST-ZIP D ☐ DELETE

TITLE BRONSON, OSWALD P

NAME 107 PINE CONE CT

STREET ADDRESS DAYTONA BEACH FL 32119

CITY-ST-ZIP TD ☐ DELETE

TITLE WELLS, LEONARD R

NAME 1622 N. 72ND ST

STREET ADDRESS PHILADELPHIA PA 19151

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)