## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 7007

(5)

## ALDERSGATE METHODIST CHURCH INC.

Mailing Address

## FILED Feb 06 1997 8:00am Secretary of State



Suries Apr. #, etc   28   Suries Apr. #, etc   Suri	Principal Place	e of Business	Maling Address						
3. Date incorporated or Qualified Of (11) 1960 3. Date of Last Report O2/27/1986  3. Principal Place of Business 2. Mailing Address 4. FER Hamber 59-1164 103 New Applied For 59-1164 103 New Applied									
Suries Apr. #, etc   28   Suries Apr. #, etc   Suri									
Surie   Apt   #, etc   Surie	2. Principal Place of Business Suite, Apt. #, etc		Suite, Apt. #, etc.						
City & State    Country   Zip								\$8.75 Additional	
Zip Country   Zip   Zip	City & State	2	City & State			, , ,		5.00 May B	 3e
O'HARA, DOLORES 5821 N.E. 17TH AVENUE FT LAUDERDALE FL 33334  11. Pursuant to the provisions of Sociators 617 0609 and 617 1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of significant spirit, and accept the obligations of, Sociators 617 0509 and 6	¬ ·	<u>├</u>	Zıp	<b>—</b>	у	8. This corporation has liability for	intangible tax	under s. 199.0	
O'HARA, DOLORES 5221 N.E. 17TH AVENUE FT LAUDERDALE FL 33334  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 register 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, are lamiliar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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, are lamiliar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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, 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, or board of directors. I hereby accept the appointment as registered agent, and the purpose of changing its register agent and the purpose of change in the purpose of change	4								<del></del>
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FT LAUDERDALE FL 33334    83				82	1	Address (P.O. Box Number is Not Acceptat	ole)	····	
The 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 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 Types of change of registered agent and the Fagotacitie policies.  DEFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE OFFICERS AND DIRECTORS 11. TITLE  I TR  OFFICERS AND DIRECTORS 11. TITLE  OFFICERS AND DIRECTORS IN 12.  TR  OFFICERS AND DIRECTORS 11. TITLE  I Change Additions 11. TITLE  I TR  OFFICERS AND DIRECTORS 11. TITLE  I TR  OFFICERS AN					1				
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14. 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 OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/97

954/443-2823