		FILE NOW: FIL	ING FEE IS \$61	.25				
NONPROFIT FLORIDA DEPARTA CORPORATION Sandra B. A.								
ANNUAL REPORT Sepretary				_				
ļ	· · · · · · ·	19962-1-96	B DIVISION OF C	ORPORATI	ONS C	<u>. </u>		
Ę	OCUI	MENT # 70143	5 (0)					
		OOD LAKE CHURCH OF (CHRIST, INC.					
Principal Place of Business Mailing Address						#10# Q1901 Q1911 B1914 B1911 I		
10790 SW 36TH ST 10790 SW 36TH ST MIAMI FL 33165 MIAMI FL 33165			-					
						3. Date Incorporated or Qualified 09/19/1960	3a. Date of Last (
2. 21	Principa! Pla	ace of Business	2a. Mailing Address 26		***********	4. FEI Number 05-1600082		Applied For
22	Suite, Apt.	ite, Apt. #, etc. Suite, Apt. #, etc.		•	*** 1	Certificate of Status Desired	□ \$8.75	Additional Required
23	City & State	y & State City & State				6. Election Campaign Financing	□ \$5.00	D May Be
	Zip	Country	28	Country		Trust Fund Contribution 8. This corporation has liability for in	ntangible tax under s.	1 to Fees 199.032,
24		25 25 9. Name and Address of Curre		30		Florida Statutes 10. Name and Address of New Ro	Yes No	
				81	Name			
MATHERLY, FRANK 10790 SW 36TH ST.			82	Street Addr	ess (P.O. Box Number is Not Acceptable	θ)		
MIAMI FL 33165-0617			83		-70 - 1-20, 1-24-1			
				84	City		85 Zip	Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the				the above-	named corpora	ation submits this statement for the purr	ose of changing its re	enistered office
	or register	ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	ida. Such change was authorized	by the corp	oration's boar	d of directors. I hereby accept the appo	intment as registered	agent. I am
SI	GNATURE _	Signature, typed or printed name of registered again	it and little if applicable. (NOTE:	Registered Age	nt signature required	5 when reinstating)	DATE	
12			ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITI NA		D Castel, gary b	DELETE	1.1 TITLE 1.2 NAME			☐ Change	Addition
	REET ADDRESS	4444 ALL 4455 ALL 4555 ALL 4555		1.3 STREET	ADDRESS			
CIT	Y - ST - ZIP			1.4 CITY - S				
TIT	l	PD Susi, Henry	DELETE	2.1 TITLE			Change	Addition
NAI STE	NEE I ADDRESS			22 NAME 23 STREET	AUUBEGG			
	Y - ST - ZIP	-ZIP MIAMI FL		2 4 CITY-1	- 1			
TIT	l	TD DUMES DOD	DELETE	31 TITLE			Change	Addition
NAI STE	ME REET ADDRESS	Plumlee, Bob 14520 SW 16187 STREET		3.2 NAME 3.3 STREET	ADDRESS			
	Y-\$1-ZIP	ANIAN EL CLASSES COLLASS		3.4. CITY-1	- 1			
TITI		D DI ANDO LOLO	DELETE	4.1 TITLE			☐ Change	☐ Addition
NAI Ste	ME REET ADDRESS	ORLANDO, LOLO 14520 SW 161ST STREET		4. 2 NAME 4.3 STREET ADDRESS				
	Y · S1 · ZIP	MIAMI FL		4.4 CITY-ST-ZIP				
TIT	1	SD	DELETE	5.1 TITLE			☐ Change	Addition
NA! STE	ME REET ADDRESS	Weetman, John 14757 Sw 66th Street		5.2 NAME 5.3 STREET ADDRESS				
	Y-ST-ZIP	SALSA AL PL		5.3 STREET				
TIT	i	VD	DELETE	6.1 TITLE			Change	Addition
NAI ette		STALL, WILLIE ADDRESS 14700 HARRISON STREET		6.2 NAME	1000000			
	Y-ST-ZIP	101111		6.3 STREET ADDRESS 6.4 CITY - ST - ZIP				
	. I do hereby certify that	y certify that the information supplied the information indicated on this annual	uai report or supplemental annual	ed and doe	s not qualify for	or the exemption stated in Section 119.0	ame logal affect se if i	made under
	. I do hereby certify that	y certify that the information supplied the information indicated on this annual	uai report or supplemental annual	ed and doe	s not qualify for	te and that my signature shall have the s	ame logal affect se if i	made under
14	. I do hereby certify that	y certify that the information supplied the information indicated on this ann I am an officer or director of the corpor Block 12 or Block 12 If changes, or	uai report or supplemental annual	ed and doe	s not qualify for	or the exemption stated in Section 119.0 te and that my signature shall have the signature shall have the signature shall have the signature of the section 119.0 te and that my signature of the section 119.0 te and the se	ame logal affect se if i	made under