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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # 703083

1. Corporation Name

FIRST ASSEMBLY OF GOD CHURCH OF CLEARWATER, INC.

Principal Place of Business

1739 S. GREENWOOD AVE
CLEARWATER FL 34616
US

Mailing Address

1739 S. GREENWOOD AVE
CLEARWATER FL 34616
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified

10/26/1961

4. FEI Number

59-1218816

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

LAMBERT, STEVEN
1739 S GREENWOOD AVE
34616

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code
33756

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

TITLE D DELETE

NAME AUDE, ROBERT
STREET ADDRESS 1719 BRENTWOOD DR
CITY-ST-ZIP CLEARWATER FL 33756

TITLE D DELETE

NAME WILLIAMS, TOM
STREET ADDRESS 1231 KAPOK CIR
CITY-ST-ZIP CLEARWATER FL

TITLE D DELETE

NAME ANDERSON, CARY
STREET ADDRESS 1676 EL TAIR TRAIL
CITY-ST-ZIP CLEARWATER FL 33765

TITLE P DELETE

NAME LAMBERT, STEVE
STREET ADDRESS 1739 S GREENWOOD AVE
CITY-ST-ZIP CLEARWATER FL

TITLE D DELETE

NAME KRIEVER, BLAIR
STREET ADDRESS 1351 FAIRFIELD DR
CITY-ST-ZIP CLEARWATER FL 33764

TITLE DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Change Addition

1.2 NAME BAKER, WILLIAM
1.3 STREET ADDRESS 1022 BROOKSIDE DRIVE
1.4 CITY-ST-ZIP CLEARWATER FL 33764

2.1 TITLE D Change Addition

2.2 NAME WELD, LARRY
2.3 STREET ADDRESS 29742 66TH WAY N
2.4 CITY-ST-ZIP CLEARWATER FL 33761

3.1 TITLE D Change Addition

3.2 NAME KISTNER, GARY
3.3 STREET ADDRESS 10251 135TH STREET N
3.4 CITY-ST-ZIP LARGO FL 33774

4.1 TITLE Change Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-99 585-5468
Date Daytime Phone #

CR2E037 (1/98)