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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

(1)

1996

704626

DOCUMENT #
1. Corporation Name

SOUTH LAKELAND CHURCH OF GOD, INC.												
Principal Place of Business		Mailing Address					g elifite iffilt mårte brain brein anne	#E91 @1814 B181) #180) B(B)1 B	1911 91911 1991		
5330 LAKELAND HIGHLANDS RD 5330 LAKELAND HIGH LAKELAND FL 33813 LAKELAND FL 33813 US US				LANOS RD				Tan be	e of Last F	Popod	7	
00							 Date Incorporated or Qualified 10/08/1962)4/11/19			
2. Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number		Applied For				
21		26					59-2447677	Not Applicable				
Suite, Apt. #	, etc.	Suite, Apt. #, etc. 27				5. Certificate of Status Desired	Fee Required					
City & State		City & State				Election Campaign Financing Trust Fund Contribution	- 11 ' - 1					
Zip	Country	Zip	Cou	ntry			8. This corporation has liability for i	ntangible ta:	k under s.	199.032,	٦	
24 25		29 30					Florida Statutes	Yes 🗷	No		_	
	9. Name and Address of Current	Registered Agent					Name and Address of New R	egistered #	.gent		4	
				81	Name							
RIGEL, WM. MALCOLM SR				82 Street Address (P.O. Box Number is Not Acceptable)				le)				
-	ottsland dr. Id FL 33813			83							7	
				64	City			FL	85 Zip	Code		
familiar wit	o the provisions of Sections 617.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Sections	and 617.1508, Florida Statute la Such change was authorize on 617.0503, Florida Statutes	es, the abo ed by the o	ve-n corpo	iamed coi oration's t	rporatio board o	in submits this statement for the pur of directors. I hereby accept the appo	pose of cha pintment as	nging its re registered	gistered office agent. I am	e i	
SIGNATURE _	Signature, typed or printed name of registered agent -	and title if applicable (NO	TE: Registered	Agen	t signature re	acjoired wh		DATE			_ ନ୍ତ	
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFF				CR2E037 (12/95)	
TITLE	CD	DELETE	11711		Ì				Change	Addition	=	
NAME	ramse, alan		12 N			Kar	Zamsey 33809				6	
STREET ADDRESS	7650 BRAIN LOOP				ADDRESS				809		Ŭ	
CITY-ST-ZIP	LAKELAND FL	DELETE		ITY-S	T - ZIP				Change	Addition	⊣წ	
TITLE	D DIVER DIVI		2111						oa.ngc	<u></u>		
NAME	ONTOEN, DIEE			2 2 NAME 2 3 STREET ADDRESS								
STREET ADDRESS	903 Balsamina Brandon Fl	1111 V		2 4 CITY-ST-ZIP				33	510			
CITY-ST-ZIP TITLE	D D D D D D D D D D D D D D D D D D D	DELETE	31T			10 S	D 5 Williams, Marsha 2714 Highland Vue Pkwy Lakelaud FL 3381		Change	Addition		
NAME	MALLISON, MARYBELLE	_	3 2 N	AME	TADORESS 2		lliams, Marsha	٦L .				
STREET ADDRESS	1335 BELL AVE		33\$	TREET			14. Highland Vue !	rwy				
CITY-ST-ZIP	LAKELAND FL		34 (DITY - S	ST-ZIP	Lat	celand FL	338	13			
TITLE	DT	DELETE	417	ITLE					Change	Addition		
NAME	NICHOLS, FOREST J		4.21	NAME								
STREET ADDRESS	2025 SYLVESTER RD. B.B7		4.3 \$18		ADDRESS						ı	
CITY-ST-ZIP	LAKELAND FL	4.4			ST-ZIP	33803			Addition	-		
TITLÉ		DELETE	511					,	Criange	[] Addition		
NAME			5.2 N		!	1					Ì	
STREET ADDRESS					ADDRESS							
CITY - ST - ZIP		DELETE			-ST-ZIP				Change	Addition		
TITLE			6.2 NA						_ •	_		
NAME STREET ADDRESS					T ADDRESS							
CITY . ST . 7ID			640	DITY - S	ST-ZIP	1						
14. I do hereb	I graph operation that the information supplied		nished and	doe	s not qua						\neg	
certify tha oath; that appears ii	t the information indicated on this annual am an officer or director of the corporal Block 12 or Block 13 if changed, or o											
SIGNAT	SIGNATURE AND TYPEO OF	R MINTED NAME OF SITURING OFFICE	ER OR DIRE	TOR			Date		Daytme Phone	#	-	