

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 24 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 705011 (5)

1. Corporation Name

PLEASANT GROVE ASSEMBLY OF GOD CHURCH AND CAMP GROUNDS, INC.



Principal Place of Business

Mailing Address

7051 TURKEY CREEK RD.  
DURANT FL 33530-0278  
US

7051 TURKEY CREEK RD.  
PO BOX 278  
DURANT FL 33530-0278  
US

3. Date Incorporated or Qualified  
01/11/1963

3a. Date of Last Report  
02/05/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30

4. FEI Number  
59-1965796

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COOPER, JOHN A  
7050 SOUTH TURKEY CREEK ROAD  
DURANT FL 33530

81 Name

HARRIS, ALMER

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

7019 S TURKEY CREEK RD

83

84 City

DURANT

FL

85 Zip Code

33530

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

*Almer Harris*

(NOTE: Registered Agent signature required when reinstalling)

DATE 3/20/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	COOPER, JOHN A	
STREET ADDRESS	7051 TURKEY CREEK RD.	
CITY - ST - ZIP	DURANT FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SWINDAL, WILLIAM L	
STREET ADDRESS	2738 BLOUNT ROAD	
CITY - ST - ZIP	DURANT FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	ALBRITTON, M LANE	
STREET ADDRESS	3422 NICHOLS RD.	
CITY - ST - ZIP	LITHIA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	HARRIS, ALMER	
1.3 STREET ADDRESS	7019 S TURKEY CREEK RD	
1.4 CITY - ST - ZIP	DURANT FL 33530	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VARN, BRYAN	
3.3 STREET ADDRESS	5105 JOE ARMOR RD	
3.4 CITY - ST - ZIP	PLANT CITY FL 33567	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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:

*Almer Harris*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 3/20/97

Daytime Phone # 0046749

CR2E037 (9/96)