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Feb 26 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 # 706262 (3)

1. Corporation Name

GOSPEL LIGHT HOUSE CHURCH, INC.



Principal Place of Business

Mailing Address

2727 PICKETVILLE ROAD  
P.O. BOX 6082  
JACKSONVILLE FL 32220

2727 PICKETVILLE ROAD  
P.O. BOX 6082  
JACKSONVILLE FL 32220-2471

3. Date Incorporated or Qualified  
10/09/1963

3a. Date of Last Report  
02/12/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TREADWELL, H D  
1117 CLAYTON ROAD  
JACKSONVILLE FL 32205

81 Name

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

83

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 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME TREADWELL, H.D.  
STREET ADDRESS 1117 CLAYTON RD.  
CITY- ST- ZIP JACKSONVILLE FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP

TITLE VD  
NAME HAND, EDWARD  
STREET ADDRESS 2834 BROWARD RD.  
CITY- ST- ZIP JACKSONVILLE FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

TITLE STD  
NAME BOWERS, DALLAS MRS.  
STREET ADDRESS 885 LANE AVENUE S #338  
CITY- ST- ZIP JACKSONVILLE FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

TITLE D  
NAME TATUM, JIM  
STREET ADDRESS 5457 NORMANDY BLVD.  
CITY- ST- ZIP JACKSONVILLE FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

TITLE D  
NAME HAND, RANDY  
STREET ADDRESS 548 THERESA ROAD  
CITY- ST- ZIP YULEE FL

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

TITLE D  
NAME BOWERS, WILTON SR.  
STREET ADDRESS 885 LANE AVE. S #338  
CITY- ST- ZIP JACKSONVILLE FL

6.1 TITLE  
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:

Rev. H. D. Treadwell

2-17-97 904-7865877

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E037 (9/96)