## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

Principal Place of Business  Mailing Address  10000 S. W. 162ND STREET MAMI FL 33157  Mailing Address  2. Principal Place of Business  3. Date Incorporated or Cusified  3. Post Incorporation of Cusified  4. FEI Number  5. Certificate of Status Dosired  5. Certificate of Statu	10300 S. W. 162ND STREET MIAMI FL 33157  10300 S. W. 162ND STREET MIAMI FL 33157  4. F  2. Principal Place of Business 21 Suite, Apt. #, etc. Suite, Apt. #, etc. 6. E	Date Incorporated or Qualified  03/31/1964  El Number  59-1357205  Applied For  Not Applicable  Certificate of Status Desired  \$8.75 Additional Fee Required	
MAMI FL 33157  Miski FL 33157	MIAMI FL 33157  MIAMI FL 33157  4. F  2. Principal Place of Business  2a. Mailing Address  5. C  Suite, Apt. #, etc.  Suite, Apt. #, etc.  6. E	03/31/1964  El Number Applied For Not Applicable  Certificate of Status Desired S8.75 Additional Fee Required	
2. Principal Place of Business   2a. Mailing Address   5. Certificate of Status Desired   \$8.75 Additional Fee Required   \$1.00 Apt. #, etc.   5. Certificate of Status Desired   \$2.00 Apt. #, etc.   5. Certificate of Status Desired   \$2.00 Apt. #, etc.   5. Certificate of Status Desired   \$3.00 May 86 Added to Fee City & State   City & State   City & State   7. Is thin comportation a homeworse association?   22.00 Apt. #, etc.   22.00 Apt. #, e	21 26 5. C Suite, Apt. #, etc. Suite, Apt. #, etc. 6. E	Pertificate of Status Desired \$8.75 Additional Fee Required	
Sulto, Apl. #, etc.  To the Fund Confribution  Added to Fees  Added to Fees  Added to Fees  To Is this nonprofit corporation a homeowners association?  Per sonal Property Tax due Junto 3.0.  Per sonal Property Tax due Junto 3.0.  Sulto, Apl. #, etc.  Sulto, Apl. #, etc.  Sulto, Apl. #, etc.  Sulto, Apl. #, etc.  To S	21 26 5. C Suite, Apt. #, etc. Suite, Apt. #, etc. 6. E	Fee Required	
Suite, Apt. #, etc.    Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite, Apt. #, etc. 6. E		
City & State	22 Z	TO THE PARTY OF TH	
Zip			
Zip			
24 25 28 30 Personal Property Tax due Jume 30.			
9. Name and Address of Current Registered Agent    Standard   Stan		· · · · · · · · · · · · · · · · · · ·	
GRANBERRY, DORIS  16505 SW 103 CT MIAMI FL 33157  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes the above-named corporation's board of directors, I hereby accept the obligations of, Section 617.0502, Florida Statutes the orroration's board of directors, I hereby accept the appointment as registered agent. I am larguist and eacept the obligations of, Section 617.0503, Florida Statutes the corporation's board of directors, I hereby accept the appointment as registered agent. I am larguist and eacept the obligations of, Section 617.0503, Florida Statutes  SIGNATURI			
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 agent. I am is pulse of 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 is pulse of both accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  PASTOR  (NOTE: Registered Agent Signature required when reinscusting)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CT  MAME  GRANBERRY, DORIS  SIRET ADDRESS  ITILE  ST  MAME  ALSUM, DORTHY  STREET ADDRESS  CITY-ST-2P  GOULDS FL  TITLE  TITLE  TITLE  ALSUM, DORTHY  STREET ADDRESS  CITY-ST-2P  GOULDS FL  TITLE  TITLE  TITLE  ALSUM, DORTHY  STREET ADDRESS  STR	81 Name CARI	EY. REV. ED.	
MIAMI FL 33157    84	1 = 1 = 1 = 2 = 2	). Box Number is Not Acceptable)	
### City ### Am   FL   35   37   Code   33   5   7    11. Pursuant to the provisions of Sections 617.0502 and 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am tagnish and accept the obligations of, Section 617.0503, Florida Statutes.    Comparison   FL   35   Zip Code   33   5   7      Code   34   5		5 S.W. 77 Court	
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 lits registered agent. I am tagging the data cacept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CT  MAME  GRANBERRY, DORIS  STREET ADDRESS  CITY-ST-ZIP  MI/AMI, FL 0  TITLE  TI	MIAMI FL 3313/		
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 lapids and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  CPASTOR  (NOTE: Registered day the corporation's board of directors. I hereby accept the appointment as registered agent. I am lapids and the registered agent all tile registered by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lapids agent all tile registered agent all tile registered by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lapids agent all tile appointment as registered agent. I am lapids agent all tile appointment as registered agent all tile appointment agent. I am lapids agent all tile appointment as registered agent all tile appointment agen	84 City m: An	FL 85 Zip Code 7	
SIGNATURE   Sign	11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above named cornoration	submits this statement for the nurnose of changing its registered	
SIGNATURE   Sign	agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.	ard or directors. I hereby accept the appointment as registered	
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CT  GRANBERRY, DORIS  112 NAME  STREET ADDRESS  16505 SW 103 CT  MIAMI, FL 0  114 CITY-ST-ZIP  TITLE  ST  ALSUM, DORTHY  22 NAME  22 NAME  22070 SW 108 CT  22 STREET ADDRESS  CITY-ST-ZIP  TITLE  T  ROBERTS, LEONARD  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FL 0  32 NAME  31 STREET ADDRESS  CITY-ST-ZIP  MIAMI, FL 0  32 NAME  33 STREET ADDRESS  CITY-ST-ZIP  MIAMI, FL 0  TITLE  ROBERTS, LEONARD  STREET ADDRESS  CITY-ST-ZIP  MIAMI, FL 0  DELETE  4.1 TITLE  ROBINSON, BETTY  12320 SW 249TH ST  Addition	SIGNATURE PASTOR		
DELETE			
NAME   GRANBERRY, DORIS   1.2 NAME   1.3 STREET ADDRESS   16505 SW 103 CT   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   MIAMI, FL 0   1.4 CITY-ST-ZIP			
STREET ADDRESS   16505 SW 103 CT	•		
TITLE ST DELETE 2.1 TITLE Change Addition  NAME ALSUM, DORTHY 2.2 NAME  STREET ADDRESS 22070 SW 108 CT 2.3 STREET ADDRESS  CITY-ST-ZIP GOULDS FL 2.4 CITY-ST-ZIP  TITLE T SDELETE 3.1 TITLE Change Addition  NAME ROBERTS, LEONARD 3.2 NAME  STREET ADDRESS 8441 SW 144 ST 3.3 STREET ADDRESS  CITY-ST-ZIP MIAMI, FL 0 3.4. CITY-ST-ZIP  TITLE FS DELETE 4.1 TITLE T ADDRESS  NAME ROBINSON, BETTY 4.2 NAME  STREET ADDRESS 12320 SW 249TH ST 4.3 STREET ADDRESS			
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TITLE         T         DELETE         3.1 TITLE         ☐ Change         ☐ Addition           NAME         ROBERTS, LEONARD         3.2 NAME         3.2 NAME         3.3 STREET ADDRESS         CITY-ST-ZIP         3.4 CITY-ST-ZIP         MIAMI, FL 0         3.4 CITY-ST-ZIP         TITLE         FS         ☐ DELETE         4.1 TITLE         T         Addition         Addition           NAME         ROBINSON, BETTY         4.2 NAME         4.3 STREET ADDRESS	STREET ADDRESS 22070 SW 108 CT 2.3 STREET ADDRESS		
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STREET ADDRESS 5.3 STREET ADDRESS			
CITY - ST - ZIP 5.4 CITY - ST - ZIP		Change Addition	
TITLE DELETE STATE Addition		i_i Orlange	
TITLE         DELETE         6,1 TITLE         Change         Addition           NAME         6,2 NAME	STREET ADDRESS 6.3 STREET ADDRESS	i	

**FILED** 

Feb 03 1998 8:00am

Secretary of State