

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 PM 3: 26

DOCUMENT # 709641 (5)
1. Corporation Name
FIRST CHURCH OF GOD OF CLEARWATER, FLORIDA, INC.

Principal Place of Business Mailing Address
2110 NORTH HERCULES AVE. CLEARWATER FL 34623
2110 NORTH HERCULES AVE. CLEARWATER FL 34623

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/23/1965	3a. Date of Last Report 04/26/1994
4. FEI Number 59-1781112	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 30
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9. Name and Address of Current Registered Agent
COLE DENNIS
2110 N HERCULES AVE
CLEARWATER FL 34623

10. Name and Address of New Registered Agent	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SD	WILBRAHAM, LINDA 2010 GAYLE PL. CLEARWATER FL	1.1 TITLE SD	Dove, William K. Jr. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	1309 Young Ave.
STREET ADDRESS		1.3 STREET ADDRESS	Clearwater, FL 34616
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE VD	KING JORDAN 700 SEVERS LANDING PALM HARBOR FL	2.1 TITLE VD	Collier, Terry L. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	6847 Circle Creek Dr.
STREET ADDRESS		2.3 STREET ADDRESS	Pinellas Park FL 34665
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE TD	WILBRAHAM STEPHEN 2010 GAYLOR PLACE CLEARWATER FL	3.1 TITLE T	Jon Andersen <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	1181 Fairway Dr.
STREET ADDRESS		3.3 STREET ADDRESS	Dunedin, FL 34698
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE D	BABER, DOUGLAS 2049 NUGGET DRIVE CLEARWATER FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE D	FORSBERG LORREN 2188 ELM PLACE #1104 DUNEDIN FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE PD	COLE, DENNIS 9220 MERRIMOOR BLVD LARGO FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 in an attachment with an address.

SIGNATURE: Dennis D. Cole Dennis D. Cole, President 02/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Month Year)