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Jun 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **711393** (9)

1. Corporation Name

SKYVIEW ASSEMBLY OF GOD, INC.

Principal Place of Business

**3330 SKYVIEW DR
LAKELAND FL 33801**

Mailing Address

**1515 CRESCENT PLACE
LAKELAND FL 33801-6603
US**

3. Date Incorporated or Qualified

08/25/1966

4. FEI Number

59-2240658

Applied For

Not Applicable

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

**CHASEY, HARRY
3808 OLD HWY 37 #1
LAKELAND FL 33813**

81 Name

SCOTT CALDWELL

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

1701 W. PARKER ST

83

84 City

LAKELAND

FL

85

Zip Code

33801

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]
Signature: typed or printed name of registered agent and title if applicable

Secretary
(NOTE: Registered Agent signature required when reinstating)

4/22/98
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	CHASEY, HARRY	
STREET ADDRESS	3803 OLD HWY 37 1	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SHELTON, ROYCE	
STREET ADDRESS	4623 HIGHLANDS PLACE DRIVE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	BISHOP, JOHN	
STREET ADDRESS	1515 CRESCENT PL	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	O'HOWERTON, CHRISTOPHER	
STREET ADDRESS	338 GRIFFIN AVE	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GRAY, RICHARD S	
STREET ADDRESS	2521 RALPH STREET	
CITY-ST-ZIP	LAKELAND FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TEMPLES, JAMES	
STREET ADDRESS	540 SADDLEBAG LANE	
CITY-ST-ZIP	LAKELAND FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D RICK MYERS
4.3 STREET ADDRESS	426 HAMPTON AVE
4.4 CITY-ST-ZIP	LAKELAND FL 33801
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	S/D SCOTT CALDWELL
5.3 STREET ADDRESS	1701 W. PARKER ST
5.4 CITY-ST-ZIP	LAKELAND FL 33801
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 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:

[Signature]

JOHN A. BISHOP

4/23/98

(941) 666-2020

CP2E037 (10/97)