FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 711904

(3)

1. Corporation	GOSPEL SINGERS EVANG	BELISTIC CRUSADE, IN	3 .		
Principal Place	of Business	Mailing Address		I FOR LET LUND FLOOR FROM ANALES DOLLER	DIĞI BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL 1880)
2015 51ST AVENUE EAST 2015 51ST AVENUE EAST BOX 144 BOX 144 ONECO FL 34264-0144 ONECO FL 34264-0144					
ONECOU PL 3	4204-0144	ONEGO PE SIZOFOIA		3. Date Incorporated or Qualified 12/06/1966	3a. Date of Last Report 04/10/1995
2. Principal Pla 21	ace of Business	2a. Mailing Address 26		4. FEI Number 59-6194207	Applied For Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	See Required
City & State	}	City & State		Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to rees
24	25		30		Yes No
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of New Re	egistered Agent
			81 Name		
FANECA, MARGARET			82 Street Addr	ess (P.O. Box Number is Not Acceptable	Θ)
2015 51ST AVENUE EAST			83		
ONECO	FL 34264		63		
			84 City		FL 85 Zip Code
or register familiar wit	o the provisions of Sections 617.0502 ed agent, or both, in the State of Flori th, and accept the obligations of, Sect	da. Such change was authorized	the above-named corpor by the corporation's boar	ation submits this statement for the pury of of directors. I hereby accept the appo	pose of changing its registered office introduction as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature required		DATE
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFI	
TITLF	PD FANSOA MADOADET	DELETE	1.1 TITLE	HILY BAILE	Change Addition
NAME	FANECA,MARGARET 2015 51ST AVENUE EAST		1.2 NAME	165 - 17 st cte	E
STREET ADDRESS	ONECO FL		1.3 STREET ADDRESS	no South FLA	34203
CITY-ST-ZIP TITLE	DVP	DELETE	1.4 CITY-ST-ZIP	Lite Car	Change Addition
NAME	CLINE, RICHARD T.		2.2 NAME	JILAN DYOER	T
STREET ADDRESS	2907 59 ST CT E		2.3 STREET ADDRESS	21 - alpine Cu	cle E
CITY - ST - ZIP	BRADENTON FL		2 4 CiTY-ST-ZIP	makenton, the	34209
TITLE	DT	DELETE	31 TITLE	, , , , , , , , , , , , , , , , , , , 	Change Addition
NAME	FANECA, STANLEY		3 2 NAME		
STREET ADDRESS	2015 51ST AVENUE EAST		3 3 STREET ADDRESS		
CITY - ST - ZIP	ONECO FL		3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	CLINE, THOMAS H.		4. 2 NAME		
STREET ADDRESS	5220 33RD STREET EAST		4.3 STREET ADDRESS		
CITY - ST - ZIP	OCECO FL	DELETE	4.4 CITY-ST-ZIP		Character C Addition
TITLE	DS CHINE BETTY	[_]DELETE	5.1 TITLE		Change Addition
NAME DIRECT ADDRESS	CLINE, BETTY 5220 33RD STREET EAST		5.2 NAME		
STREET ADDRESS	BRADENTON FL		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	BAILEY, JR. W J	<u></u>	6.2 NAME		<u></u>
STREET, ADDRESS	5105-17 ST. CT. E		6.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		6.4 CITY - ST - ZIP		
14. I do hereb		with this filing is voluntarily furnish		or the exemption stated in Section 119.	07(3)(k), Florida Statutes. I further

signature:

1. Our reservoir Centrity triat 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 early; 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:

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3R2F037 (12/95)