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FILED

Jan 22 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS**DOCUMENT # 714179 (9)**

1. Corporation Name

**CHURCH OF GOD IN CHRIST BIBLE WAYS OF RIVIERA BEACH, INC.**

Principal Place of Business

Mailing Address

**OF RIVIERA BEACH INC  
665 7TH ST  
RIVIERA BEACH FL 33404****OF RIVIERA BEACH INC  
665 7TH ST  
RIVIERA BEACH FL 33404-7427**3. Date Incorporated or Qualified  
**02/29/1968**3a. Date of Last Report  
**02/09/1996**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

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30

4. FEI Number  
**71-4179602**Applied For  
Not Applicable5. Certificate of Status Desired ☐**\$8.75 Additional  
Fee/Required**6. Election Campaign Financing  
Trust Fund Contribution ☐**\$5.00 May Be  
Added to Fees**8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PORTER, EUGENE  
1448 8TH ST  
WEST PALM BEACH FL 33401**

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 ☐ DELETE  
NAME **OD BARRON, EARL**  
STREET ADDRESS **2251 AVE H EAST**  
CITY - ST - ZIP **RIVIERA BEACH FL**1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP ☐ Change ☐ AdditionTITLE ☐ DELETE  
NAME **D CUMMINGS, CLAUDE**  
STREET ADDRESS **917 W 2ND ST.**  
CITY - ST - ZIP **RIVIERA BEACH FL**2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME **OD CUMMINGS, BEATRICE**  
STREET ADDRESS **917 W 2ND ST.**  
CITY - ST - ZIP **RIVIERA BEACH FL**3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME **S BARRON, ALLIE J.**  
STREET ADDRESS **2251 AVE. H EAST**  
CITY - ST - ZIP **RIVIERA BEACH FL**4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME **O PORTER, ISABELL**  
STREET ADDRESS **1448 8 ST.**  
CITY - ST - ZIP **WEST PALM BEACH FL**5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0040020

CR2E037 (9/96)