

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**

DOCUMENT # 714389

(4)

95 FEB -9 AM 11:28

1. Corporation Name

GOSPEL LIGHT BAPTIST CHURCH OF WINTER PARK, INC.

Principal Place of Business

**3838 HOWELL BRANCH RD
WINTER PARK FL 32792-7547
US**

Mailing Address

**3838 HOWELL BRANCH RD
WINTER PARK FL 32792-7547
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1968

3a. Date of Last Report

03/29/1994

4. FEI Number

59-2450910

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$6.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

**COON, STANLEY E.
7548 DOCKSIDE STREET
WINTER PARK FL 32792**

10. Name and Address of New Registered Agent

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 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	
TITLE	PD
NAME	COON, STANLEY E.
STREET ADDRESS	7548 DOCKSIDE STREET
CITY- ST- ZIP	WINTER PARK FL
TITLE	SD
NAME	COON, GAIL LEE
STREET ADDRESS	7548 DOCKSIDE STREET
CITY- ST- ZIP	WINTER PARK FL
TITLE	TD
NAME	LANCASTER, WILLIAM
STREET ADDRESS	7491 BETTY ST
CITY- ST- ZIP	WINTER PARK FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	Director
4.3 STREET ADDRESS	Rasquinha, Harry
4.4 CITY- ST- ZIP	1208 Evangeline Avenue Orlando, Florida 32809-7034
5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	Director
5.3 STREET ADDRESS	Walkley, Gary
5.4 CITY- ST- ZIP	4405 Sunset Lane Oviedo, Florida 32765
6.1 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 on an attachment with an address.

SIGNATURE:

Stanley E. Coon, President

1-25-1995

407-678-8443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone (Area #)