FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

714633

(5)

THE PENTECOSTAL OVERCOMING HOLINESS CHURCH. INC.

FILED Feb 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					
* 158 EAST CLEVELAND STREET			TREST		A Detailed and a Coulling
APOPKA FL 32703		APOPKA FL 32703			s. Date Incorporated or Qualified 05/22/1968
{					4. FEI Number Applied For
 					05-0105000 Not Applicable
2. Principal Place of Business		2a. Mailing Address 26			Certificate of Status Desired SB.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State		City & State			Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association?
23		28			Yes No
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the current year intangible
24	25		30]		Personal Property Tax due June 30. Yes No
<u> </u>	9. Name and Address of Curren	it Registered Agent	81	Name	10. Name and Address of New Registered Agent
	INV.LET INC.		[0,	Idenie	·
HALL,HENRY LEE (REV) 158 E. CLEVELAND ST.			87	Street	Address (P.O. Box Number is Not Acceptable)
APOPKA FL 32703			83	 	
75 07 161 1			84	02	lor lory Only
}			1	7,	FL 85 Zip Code
11. Pursuant to	the provisions of Sections 617.050	2 and 617.1508, Florida Statute	s, the above	e-name	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
agent. I am	familiar with, and accept the obligation	ations of Section 617.0503, Flor	rida Statute	y me cor s.	poration's board of directors, thereby accept the appointment as registered
1	January Jack +	/ <i>n u</i>			02-05-98
12.	onature, typed or provided name of registered again		Registered Ac	ent signafur	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	HALL,HENRY LEE (ELDER)	_	1.2 NAME		
STREET ADDRESS	158 É. CLEVELAND ST.		1.3 STREE	T ADDRESS	
CITY-ST-ZIP	APOPKA FL		1.4 CITY-	ST - ZIP	
TITLE	VD	DELETE	2.1 TITLE		Change Addition
NAME	HALL, HANNAH M.		2.2 NAME		
STREET ADDRESS	158 E. CLEVELAND ST.			1 ADDRESS	
CITY-ST-ZIP	APOPKA FL STD	DELETE	2. 4 CITY	ST-ZIP	Chance Addition
TITLE	SWIFT, KAY F.	C.J Officia	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS	402 E. 13TH STREET			T ADDRESS	1
CITY-ST-ZIP	APOPKA FL		3.4. CITY		
TITLE	x0x	X) DELETE	4.1 TITLE	01-611	Deacon Change K Addition
	XVIDEX.XRVIYK		4. 2 NAM	:	Grethen Poole
	AWASBRAKON AWA		4.3 STREE	T ADDRESS	199 W. Cleveland Street
	MRRKATK		4.4 CITY-	ST-ZIP	Apopka, Florida 32703
TITLE	M	DELETE	5.1 TITLE		Change Addition
NAME	CROSBY, ELMER J		5.2 NAME		
STREET ADDRESS	222 N. HIAWASSEE RD.		4	T ADDRESS	
TITLE	ORLANDO FL D	☐ DELETE	5.4 CITY- 6.1 TITLE	ST-ZIP	☐ Change ☐ Addition
NAME	SWIFT FUGENES	wrection made	6.1 IIILE 6.2 NAME		Li custing Li Addition
STREET ADDRESS	SWIFT, EUGENE S CO 402 E. 18TH STREET-SCHOOL	2 E 131K Street		T ADDRESS	
CITY-ST-ZIP	APOPKA FL	12	6.4 CITY-		
		ith this filing does not qualify for			ted in Section 119.07(3)(I), Florida Statutes. I further certify that the information

Indicated on this annual report or supplied with this limit does not dealing to the exemption stated in Section 1.19.07(3)(), Florida Statutes. I further certain that he information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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

HENNE THE OFFICE NAME OF SIGNING OFFICER OF DIRECTO

02-05-98

Daytime Phone # passage