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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 714633

1. Corporation Name
THE PENTECOSTAL OVERCOMING HOLINESS CHURCH, INC.

Principal Place of Business: % 158 EAST CLEVELAND STREET APOPKA FL 32703
 Mailing Address: % 158 EAST CLEVELAND STREET APOPKA FL 32703



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/22/1968	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		05-0105000	
24 Country		29 Country		30	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For	
				Not Applicable	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				\$8.75 Additional Fee Required	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HALL, HENRY LEE (REV) 158 E. CLEVELAND ST. APOPKA FL 32703				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

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: Henry Lee Hall (Pastor) Henry Lee Hall DATE: 01-14-99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	HALL, HENRY LEE (ELDER)	1.2 NAME	
STREET ADDRESS	158 E. CLEVELAND ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	HALL, HANNAH M.	2.2 NAME	
STREET ADDRESS	158 E. CLEVELAND ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	SWIFT, KAY F.	3.2 NAME	
STREET ADDRESS	402 E. 13TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	POOLE, GRETHEN P	4.2 NAME	
STREET ADDRESS	199 W CLEVELAND ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	APOKA FL 32703	4.4 CITY-ST-ZIP	
TITLE	M	5.1 TITLE	
NAME	CROSBY, ELMER J	5.2 NAME	
STREET ADDRESS	222 N. HIWASSEE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	SWIFT, EUGENE S	6.2 NAME	
STREET ADDRESS	402 E 13TH ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL	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, with all other like empowered.

SIGNATURE: Henry Lee Hall DATE: 01-14-99 DAYTIME PHONE #: 889-7324

CRZE037 (11/98)