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 #

718345

(2)

NEW JERUSALEM HOLINESS CHURCH, INC.

Principal Place of Business Malling Address									T 1804IT 10001 (100) AUTOU PILES DIQUE GELE GEOFF	// 0 // 0 /0// 0/0/	N DIBLE DIDIT TORT	
209 SW 8 CT			59	599 N DEERFIELD AVE				3.	J. Date Incorporated or Qualified	-		
Deerfield be/ Us	ACH FL 3344	1	DE	DEERFIELD BEACH FL 33441					04/16/1970			
03								4.	Fet Number		Applied For	
									59-1540569		Not Applicable	
2. Principal Pi	iace of Busin	1065		2a. Mailing Address				6.	. Certificate of Status Desired		5 Additional	
Suite, Apt.	# ato		26	Sulte, Apt. #, etc.							Required	
22	W, GIU.		27	<u></u>				6.	i. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees	
City & State	ð			City & State				7.	7. Is this nonprofit corporation a homeowners association?			
23 Zin	 ,	Country	28						☐ Yes	□ No		
 1	Zip Country			Zip Country			'	8.	I. This corporation owes or has paid the c			
24		25 and Address of Curre	29 ent Regis					10.	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
		MIG 7001920 21 40	111111111	torou Ago		81	Name					
GIBSON,			82		at Address (P.O. Box Number is Not Acceptab							
599 N. DEERFIELD AVENUE							Oii Go.	Addition to	F.O. DOX HUHIDOI IS 1101 (1000) MIDIO)			
Deerfie	ELD BEACH	I FL 33441				83						
						84	City		F	85 Z	ip Code	
11. Pursuant t	to the provisi	ions of Sections 617.05	02 and 6	17.1508, Florida Stat	lutes, the	above	e-named	corporatio	on submits this statement for the purpose board of directors. I hereby accept the ap	of changing	g its registered	
	m familiar wi	th, and accept the oblic	jations of	f, Section 617.0503,	Florida S	tatutes	ino ou.,	poranone	board or directors. Thereby accept the up	ровиновы	as registered	
SIGNATURE _	Signature, typed	for printed name of registered ag	nent and title	If epolicable (N	IOTE: Regist	ered Age	ent skonature	e required when	en reinstating) DATE			
12.	An Bramer of 1845	OFFICERS AN	•		13		111 F.B		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12	
TITLE	PD			☐ DELETE	1.1	1 TITLE				Chang	ge Addition	
NAME		i, shirley			1.2	2 NAME						
STREET ADDRESS		DEERFIELD AVENUE			1.8	3 STREET	ADDRESS					
CITY-ST-ZIP		ELD BEACH FL			1,4	4 CITY - ST	T-ZIP					
TITLE	TD			☐ DELETE	2.1	1 TITLE				Chang	e Addition	
NAME		I, ALFONSO			2.2	2 NAME						
STREET ADDRESS		DEERFIELD AVENUE	_		2.3	3 STAEET	ADDRESS		a transfer of the second			
CITY-ST-ZIP		ELD BEACH FL				4 CITY-S	T-ZIP	ļ		,_		
TITLE	\$D			☐ DELETE		1 TITLE				Chang	ye	
NAME	GIBSON,	•				2 NAME	ļ					
STREET ADDRESS		DEERFIELD AVENUE					ADDRESS					
CITY-ST-ZIP	DEENTIE	ELD BEACH FL		DD FFF	_	4. CITY- S	it-ZIP				A A 4141	
TITLE				☐ DELETE		1 TITLE				L Chang	e L. Addition	
NAME						2 NAME		ļ				
STREET ADDRESS						3 STREET	1	1				
CITY-ST-ZIP				DELETE		4 CITY-ST	r-zip	 		Chann	- I Addition	
TITLE				☐ DELETE		1 TITLE				Chang	e Addition	
NAME STREET ADDRESS						2 NAME	*********					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP TITLE				DELETE		4 CITY-ST 1 TITLE	I-ZIP	 		Chang	e Addition	
NAME				<u> </u>	1	2 NAME		}			,o	
STREET ADDRESS							ADDRESS					
OTT - 72 - 713						A CITY OF						

Thereby 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.

CR2E037 (10/97)

FILED

Mar 27 1998 8:00am

Secretary of State