FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 7

719452

(5)

THE PENTECOSTAL CHURCH OF GOD OF AMERICA, FLORID A DISTRICT, INC. Principal Place of Business Mailing Address 7401 D TEMPLE TERRACE HWY. 7401 D TEMPLE TERRACE HWY. **TAMPA FL 33637** TAMPA FL 33637-5707 3. Date Incorporated or Qualified 3a. Date of Last Report 10/05/1970 06/10/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2027383 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Zip Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SKILES. LARRY
Street Address (P.O. Box Number is Not Acceptable) SKILES, LARRY **B2** 3502 N 72ND ST 5101 PRESIDENTIAL STREET 83 **TAMPA FL 33619** City Zip Code 33584 SEFFNER 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 born, 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. LARRY E Skiles ature, typed or printed name of registered agent and title if applicable SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE PD 1.1 TITLE KINCAID, VIRGIL 1.2 NAME NAME 3214 KING RICHARD COURT 1.3 STREET ADDRESS STREET ADDRESS SEFFNER FL 33584 1.4 CITY-ST-ZIP CITY-ST-7IP DELETE X Change Addition 2.1 TITLE TITLE SD SKILES, LARRY 2.2 NAME NAME 3502 N 72ND ST STREET ADDRESS 2.3 STREET ADDRESS 5101 PRESIDENTIAL STREET TAMPA FL 33619 2. 4 CITY-ST-ZIP CITY - ST - ZIP SEFFNER, FL 33584 Change DELETE Addition TITLE 3.1 TOTLE RIMES, WENDELL 3.2 NAME NAME 55 ORANGE ST 3.3 STREET ADDRESS STREET ADDRESS LABELLE FL 33935 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 engaged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97

Date

FILED

May 16 1997 8:00am

Secretary of State

Daytime Phone # 0049017