

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 08, 2006 8:00 am
Secretary of State

03-08-2006 90185 019 ****61.25

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1. Entity Name

NORTH 56TH STREET GOSPEL CHAPEL, INC.



Principal Place of Business

**N. 56TH STREET GOSPEL CHAPEL, INC.
12811 N. 56TH STREET
TEMPLE TERRACE FL 33617
US**

Mailing Address

**P.L.C. PETERKIN
601 W. CHERRY ST
PLANT CITY FL 33563-2315
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1708618

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PETERKIN, P.L.C.
601 W. CHERRY STREET
PLANT CITY FL 33563-2315**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/27/06

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DT ☒ Delete
NAME PETERKIN, P.L.C.
STREET ADDRESS 601 W. CHERRY ST
CITY-ST-ZIP PLANT CITY FL 33563-2315

TITLE ☐ Change ☒ Addition
NAME ~~XXXXXXXXXX~~
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME CHAMBERS, CHESTER
STREET ADDRESS 22950 SOUTHSIDE DRIVE
CITY-ST-ZIP LAND 'O' LAKES FL 33639

TITLE DIRECTOR - SECRETARY/TREASURER ☐ Change ☒ Addition
NAME JERRY BALLOON
STREET ADDRESS 3415 E. FERN ST
CITY-ST-ZIP TAMPA FLA 33610

TITLE VP ☐ Delete
NAME FISHER, WILLIAM
STREET ADDRESS 7937 WOODVINE CIRCLE
CITY-ST-ZIP TAMPA FL 33615

TITLE ☐ Change ☒ Addition
NAME ~~XXXXXXXXXX~~
STREET ADDRESS ~~XXXXXXXXXX~~
CITY-ST-ZIP

TITLE D ☒ Delete
NAME BRUNO, MICHAEL
STREET ADDRESS 1H022 CHERRY LAKE DR
CITY-ST-ZIP TAMPA FL 33618

TITLE DIRECTOR ☐ Change ☒ Addition
NAME DERM BOWEN
STREET ADDRESS 1228 DRAGON HEAD DRIVE
CITY-ST-ZIP VALRICO FLA 33594

TITLE D ☐ Delete
NAME BROMFIELD, JOHN
STREET ADDRESS 16202 PEBBLEBROOK DRIVE
CITY-ST-ZIP TAMPA FL 33624

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME TUCKER, ALLEN
STREET ADDRESS 13001 N 53RD STREET
CITY-ST-ZIP TEMPLE TERRACE FL 33417

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

2/27/06

(813) 759-6435