FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 725176

(2)

THE OPA LOCKA CHURCH OF OUR LORD, INC

Principal Place of Business Mailing Address					1 100111 10010 11881 01401 11801 40810 01	'in maman maman maman maman maman maman diber akka
2010 ALI BABA AVE. 2010 ALI BABA AVE. OPA LOCKA FL 33054 OPA LOCKA FL 33054-		40				
					3. Date Incorporated or Qualified 01/05/1973	3a. Date of Last Report 05/01/1996
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number 65-0299724	Applied For Not Applicable
Suite, Apt. #, etc.		Suito, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		Cily & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country Zip		Country		This corporation has liability for intangible tax under s. 199.032,	
24	25 29 30		30	•	Florida Statutes Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Reg	jistered Agent
			8	Name		
MOORE, ERNEST 3380 N.W. 205 STREET			B	Street Add	dress (P.O. Box Number is Not Acceptabl	ө)
	CITY FL 33056		, 8	3		
			. B	,		FL 85 Zip Code
l office or r	to the provisions of Sections 617.05 registered agent, or both, in the Statum familiar with, and accept the obli	te of Florida. Such change was	authorized b	iv the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accep	rpose of changing its registered the appointment as registered
SIGNATURE	in tarillar viin, and accept the con-	gations of section strategy, r	ionaa olalak	,,,		
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable (NC	OTE: Registered A	gent signature requ	uired when reinstating)	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	SD	DELETE	1.1 TITLE			Change Addition
NAME	HEIDELBURG, WANDA M.		1.2 NAME			
STREET ADDRESS	2231 NW 196 TERR		1.8 STRE	T ADDRESS		
CITY-ST-ZIP	CAROL CITY FL		1.4 CITY-			
TITLE	TD	DELETE	2.) TITLE			Change Addition
NAME	MOORE, ERNEST		2.2 NAME			
STREET ADDRESS	3380 N W 205TH ST			T ADDRESS		
CITY-ST-ZIP	OPA LOCKA FL	T occurr	2.4 CITY	- S1 - ZIP		
TITLE	PD	☐ DELETE	3.) TITLE			Change Addition
NAME	BROWN, DWELLY		3.2 NAME			
STREET ADDRESS	1325 NW 172ND TERR			T ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	3.4. City 4.1 Title	-ST-ZIP		Change Addition
	VD Jones, Joseph					Change Addition
NAME OTOGET ADDRESS	1940 NW 52ND TERR		4.2 NAM			
STREET ADDRESS	OPA LOCKA FL		4.4 CITY-	T ADDRESS		
CITY-ST-ZIP TITLE	CD	☐ DELETE	5.) THLE			Change Addition
NAME	TUCKER, HENRY L.		5 2 NAME			
STREET ADDRESS	2010 ALIBABA AVENUE			T ADDRESS		
CITY-ST-ZIP	OPA LOCKA FL		5.4 CITY	1		
TITLE	A. 11 DA A18 1 1 P	☐ DELETÉ	6 I TITLE			☐ Change ☐ Addition
NAME			6.2 NAME	1		• <u>-</u>
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP			6 4 CITY			

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 changed, or on an attachment with an address.

1.1

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FILED

May 20 1997 8:00am

Secretary of State