## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

Aug 07 1997 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # 726302 FIRST PENTECOSTAL CHURCH OF PANAMA CITY, INC. Principal Place of Business Mailing Address 179 N TYNDALL PARKWAY 179 N TYNDALL PARKWAY P O BOX 2307 P O BOX 2307 DO NOT WRITE IN THIS SPACE PANAMA CITY FL 32402 PANAMA CITY FL 32402 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 05/02/1973 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 2a. 59-2458255 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes □ No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent TIDWELL, MARY 82 Street Address (P.O. Box Number is Not Acceptable) 6223 KELLY CT 63 PANAMA CITY FL 32404 **84** City 85 Zip Code 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 registered agent and title if applic OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE ☐ Change Addition TITLE NAME TIDWELL, MARY 1.2 NAME STREET ADDRESS 6223 KELLY CT 1.3 STREET ADDRESS PANAMA CITY FL 32404 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE ☐ Change ☐ Addition TITLE 2.2 NAME NAME CRABTREE, ALLEN E 515 PARKWOOD DR. 2.3 STREET ADDRESS STREET ADDRESS <u>Panama City, FL 00000</u> 2. 4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME MCFARLAND, DAVID STREET ADDRESS 9117 HOLLY LANE 3.3 STREET ADDRESS PANAMA CITY, FL 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE TĎ 4.1 TITLE NAME KIRKLAND, B F 4. 2 NAME STREET ADDRESS 5520 E HWY 98 4.3 STREET ADDRESS PANAMA CITY, FL 00000 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE NAME CARTER, CLEATOUS 5.2 NAME STREET ADDRESS 1492 RIDGEWOOD AVE 5.3 STREET ADDRESS PANAMA CITY, FL 00000 CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE ☐ Addition TITLE 6.1 TATLE Change TD NAME 6.2 NAME TIDWELL, JAMES STREET ADDRESS **6223 KELLY CT.** 6.3 STREET ADDRESS PANAMA CITY. FL 00000

14. I do hereby certify that the information supplied with this filing does not destrict for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this around report or supplier military 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 comporation or the receiver of trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 2 or Block 13 if changed, or on an attachment with an address.

**FILED**