

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **727250** (3)
1. Corporation Name
THE FIRST ASSEMBLY OF GOD OF ARCADIA, INC.



Principal Place of Business 201 N 11TH AVE ARCADIA FL 34206 US	Mailing Address 201 N 11TH AVE ARCADIA FL 34204
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3. Date Incorporated or Qualified 08/23/1973	
4. FEI Number 59-1899982	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country 29
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent CLAY, JAMES 6282 N E RANCH DR ARCADIA FL 34204
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 34206
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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 **JEFF VAN AKEN** (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	V CLAY, JAMES
STREET ADDRESS	P O BOX 2000
CITY-ST-ZIP	ARCADIA FL N/A
TITLE	<input type="checkbox"/> DELETE
NAME	VAN AKEN, JEFF
STREET ADDRESS	RT 7, BOX 300
CITY-ST-ZIP	ARCADIA, FL 00000
TITLE	<input type="checkbox"/> DELETE
NAME	D LOCKE, GARY
STREET ADDRESS	7597 ENVIRONMENTAL LAB RD
CITY-ST-ZIP	ARCADIA FL 34266
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	D TRUMAN, ELAM
STREET ADDRESS	RT. 1 BOX 486 N/A
CITY-ST-ZIP	ARCADIA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VAN AKEN, JEFF
2.3 STREET ADDRESS	2884 NW 1 CR 61
2.4 CITY-ST-ZIP	ARCADIA, FL 34266
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Priest, Charles
4.3 STREET ADDRESS	P.O. Box 509
4.4 CITY-ST-ZIP	Nocatee, FL 32864 N/A
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: **JEFF VAN AKEN**

CR2E037 (10/97)