FILE NOW: FILING FEE IS \$61.25

'NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham,

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(9)

GULF GATE CHURCH, INC.

FILED
May 20 1998 8:00am
Secretary of State

Principal Plac	ce of Business	Mailing Address							
	WOOD RIDGE ROAD	•	IOI S. LOCKWOOD RIDGE ROAD			3. Date Incorporated or Qualified 10/10/1973			
						4. FEI Number 59-2441318		pplied For ot Applicable	
2. Principal Place of Business 2a. Mailing Ad 21 26			ddress			5. Certificate of Status Desired	T	Additional equired	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			
City & Stat	le	City & State				7. Is this nonprofit corporation a homeowne	rs associatio	m?	
Zip 24	Country 25	Zip 29	Cou	ntry		This corporation owes or has paid the cu Personal Property Tax due June 30.		tangible No	
	9. Name and Address of Curr					10. Name and Address of New Registered	Agent		
				81	Name				
STRANI	D, Bri an			82	Ctroot Addres	as (D.O. Day Number in Net Assentable)			
1671 MOUND ST.				02	Street Addres	ss (P.O. Box Number is Not Acceptable)			
SARASOTA FL 34238			1	83					
			-	84	Oit.]05 7:m	Code	
				04	City	FL	85 Zip	Code	
11. Pursuant office or agent. I a SIGNATURE	to the provisions of Sections 617.05 registered agent, or both, in the Sta am familiar with, and accept the obli	502 and 617.1508, Florida Statute te of Florida. Such change was a gations of, Section 617.0503, Flo	es, the ab outhorized irida Stat	oove d by utes.	-named corpo the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	if changing i cointment as	ls registered registered	
SIGNATURE	Signature, typed or printed name of registered a	gont and little if applicable (NOTE	Registered	i Agen	nt signature required				
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	T T	☐ DELETE	1,1 70	TLE			L Change	☐ Addition	
NAME	CHAPPEL,RICK		1.2 NA		i				
STREET ADDRESS	5707 DORAL CT				ADDRESS				
CITY-ST-ZIP				1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition	
TITLE:					l		L. Change	L. Audilion	
NAME PROCES ADDRESS	PENDLEY, JEFFREY 2485 BREAKWATER CIR		2.2 NA		1000500				
STREET ADDRESS	SARASOTA FL 34231				ADORESS				
TITLE	T	DELETE	2. 4 CITY 3.1 TITLE		1-ZIP		Change	Addition	
NAME	KLINGLER, ROBERT	—	3.2 NAME						
STREET ADDRESS	5365 PALOS VERDES				ADDRESS				
CITY-ST-ZIP	SARASOTA FL		3.4. CI	TY-ST	T-ZIP				
TITLE	T	DELETE	4.1 TO	4.1 TITLE			Change	☐ Addition	
NAME	William Ritchie		4. 2 N	AME					
STREET ADDRESS	4215 Tarpon Road		4.3 ST	REET A	address				
CITY-ST-ZIP	Venice, Florida 34	4293	4.4 CITY-		- ZIP				
TITLE		DELETE	5.1 111	LE			Change	Addition Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET A	ADDRESS				
ÇITY-ST-ZIP		····	5.4 CI		- ZIP				
TITLE		☐ DELETE	6.1 TIT	LE			☐ Change	☐ Addition	

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:

SIGNATURE

**SIGNATURE*

**SIGNATU

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP