FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**

CLIMATINE # 700440

1. Corporation Narre FAITH TEMPLE ASSEMBLY OF GOD, INC.				SECREDIES OF STATE TALLAMASSEE, FLORIDA				
				TALLET STA	کسل بیلیو∪پر	J. 1107 (
	7				1 % 5			
Principal Place of Business Mailing Address				1 3				
504 MICHIGAN AVE. PENSACOLA FL 32505 504 MICHIGAN AVE. PENSACOLA FL 32505 PENSACOLA FL 32505								
					04/29/99 900	52 C	10x	61.25
2. Principal Place of Business 2a. Mailing Address					3. Date Incorporated or Qualifed 06/23/1975		•	
26 Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number			
Sune, Apt. #, etc. Sune, Apt. #, etc. 27				59-2513908				pplied For lot Applicable
City & State City & State								Additional
23 28			5. Certificate of Status Desired				Required	
Zip Country	Zip Coun				6. Election Campaign Financing	Ħ		May Be
17-11	25 29 30 Name and Address of Current Registered Agent				10. Name and Address of New			lo Fees
5. Marie and Address of Collect	Magistered Mgent		81]	Name	IV. Hame and Address of New	vehistelen v	- Seit	····
MALKED HILLIAN C DEV			_					
WALKER, JULIAN C REV 7700 LE GRANDE DRIVE			82	Street Addr	ess (P.O. Box Number is Not Accept	able)		
PENSACOLA FL 32514			83					
T ENGAGGER TE GESTY		L L	_				T1 =	
		Į,	84	City		FL	85 Zip	Code
Pursuant to the provisions of Sections 617.0502 office or registered agent, or both, in the State o agent. I am familiar with, and accept the obligation.	and 617.1508, Florida Statute	s, the ab	OVB-	named corp	oration submits this statement for the	purpose of	changing it	s registered
1	ons of, Section 617.0503, Flor	ida Statu	tes.			p. a.o appon		9,0,0,0
SIGNATURE Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	Agent s	signature require	d when reinstating)	DATE		
12. OFFICERS AND		13.	-		ADDITIONS/CHANGES TO OF	FICERS AN	DIRECT	ORS IN 12
TITLE P	DELETE 1.1						☐ Change	☐ Addition
NAME WALKER, JULIAN C REV	WALKER, JULIAN C REV			- 1				
STREET ADDRESS 7700 LEGRANDE DRIVE				VDORESS				
CITY-ST-ZIP PENSACOLA FL				ZIF				
TITLE D			2.1 TITLE				Change	Addition
1	FARRINGTON, TERRY		2.2 NAME					
STREET ADDRESS 1673 EAGLE STREET			2.3 STREET ADDRESS					
CITY-ST-ZIP CANTONMENT FL			2.4 CITY-ST-ZIP					
TITLE D	DELETE		3.1 TITLE		D		Change	Addition
MONTEITH, JOE			3.2 NAME		BOCZ, AARON			
STREET ADDRESS 6342 CONFEDERATE DRIVE	MAG		3.3 STREET ADDRESS		7913 TERRILYNN LN.			
CITY-ST-ZP PENSACOLA FL	FL		3.4. CITY-ST-ZIP		PENSACOLA, FL		Change	Addition
TITLE S			4.1 TITLE				[] Change	
WOOD, JAMES	** 		4.2 NAME 4.3 STREET ADDRESS					
STREET ADDRESS 10450 VINEYARD LANE				i				
CITY-ST-ZIP PENSACOLA FL	☐ DELETE	4.4 CITY 5.5 TITL	-	ZIP		~	[] Change	Addition
NAME WILKINS, RANDALL	Directie	5.7 IIIL 5.2 NAA					Change	

PENSACOLA, FL

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(I), Fiorida 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, Fiorida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

62 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

PENSACOLA FL 32526

907 CRYSTAL SPRINGS AVER

WILLIAMS, BILLY G.

DELETE

GOODRICH, VERN

1841 HALLMARK LN.

· ALED

. 99 JUL 12 AM 11: 47

Addition

☐ Change