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 # 73411

(5)

NORTHEAST CHURCH, INC.

| Principal Place of Business | Mailing Address | 1 tabits ibade liter fellen trade timts ider binte deste | |
|------------------------------------|---|--|--|
| 2828 51ST ST. SARASOTA FL 34234 | 2828 51ST ST. Sarasota Fl 34234-3324 | | |
| | | 3. Date Incorporated or Qualified 3a. Date 10/20/1975 0 | |
| Principal Place of Business 1 | 2a. Mailing Address 26 | 4. FEI Number 59-1656646 | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 5. Certificate of Status Desired | |
| City & State | City & State | 6. Election Campaign Financing Trust Fund Contribution | |

FILED

Jan 22 1997 8:00am

Secretary of State

Applied For Not Applicable

\$8.75 Additional Fee Required

| City & State | 9 | City & Stat | 9 | | | 6. Election Campaign Financing \$5.00 May Be |
|--|---|------------------------|---|--------------------|------------------|--|
| 13 | | 28 | | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | | Country | | 8. This corporation has liability for intangible tax under s. 199.032, |
| 4 | 25 | 29 | 30 | | | Florida Statutes |
| Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | | |
| | | | | 61 | Name | |
| JOHNSON, RONALD H. 2828 51ST ST. SARASOTA FL 34234 | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | | | |
| | | | 83 | ı | | |
| | | | 84 | City | 85 Zip Code | |
| | | | | | <i></i> , | FL 6 |
| 11. Pursuant | to the provisions of Sections 617.05 | 02 and 617.1508, Flo | rida Statutes, the | above | -named o | corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered |
| agent. I a | egistered agent, or both, in the State m familiar with, and accept the obliq | gations of, Section 61 | ange was authori 7.0503, Florida S | zeu by Statutes | гина согрі 3. | poration's board of directors, I hereby accept the appointment as registered |
| SIGNATURE | | | | | | |
| | Signature, typed or printed name of registered as | | | | nt signature r | required when reinstating) DATE |
| 12. | | ND DIRECTORS | | 3. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PD | L | | 1 TITLE | | Change Addition |
| NAME | JOHNSON, RONALD H. | | 1. | 2 NAME | - 1 | |
| STREET ADDRESS | 2828 51ST ST. | | 1. | 3 STREET | ADDRESS | |
| City-St-ZiP | SARASOTA FL | | | 4 CITY - S | T-ZIP | |
| TITLE | \$TD | | DELETE 2 | 1 TITLE | | Change Addition |
| NAME | JOHNSON, NOLA J | | 2 | 2 NAME | | |
| STREET ADDRESS | 2828 51ST ST | | 2. | 3 STREET | ADDRESS | |
| CITY - ST - ZIP | SARASOTA, FL 00000 | | | 4 DITY-S | SY-ZIP | |
| TITLE | VPD | | DELETE 3. | 1 TITLE | ļ | ☐ Change ☐ Addition |
| NAME | van Nort Greg | | 3. | 2 NAME | | |
| STREET ADDRESS | 2245 WALDERRMERE ST | | . 3. | 3 STREET | ADDRESS | |
| CITY-ST-ZIP | SARASOTA FL | | | 4. CITY - 5 | ST-ZIP | |
| TITLE | VD | | DELETE 4. | 1 TITLE | | Change Addition |
| NAME | Johnson, Guerin e | | 4. | 2 NAME | | |
| STREET ADDRESS | 2250 SEWARD DR | | 4. | 3 STREET | ADDRESS | |
| CITY-ST-ZIP | SARASOTA FL | | 4. | 4 CITY - S | T-ZIP | |
| TITLE | | | DELETE 5. | 1 TITLE |] | ☐ Change ☐ Addition |
| NAME | | | 5. | 2 NAME | | |
| STREET ADDRESS | | | 5. | 3 STREET | ADORESS | |
| CITY-ST-ZIP | | | 5 | 4 CITY-S | IT-ZIP | |
| TITLE | | | DELETE 6 | 1 TITLE | | Change Addition |
| NAME | | | 6. | 2 NAME | | |
| STREET ADDRESS | | | 6. | 3 STREET | ADDRESS | · |
| CITY-ST-ZIP | | | 6. | 4 CiTY- <u>S</u> | T-ZIP | |

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 composition 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, ozon any attachment with an address.

SIGNATURE:

1/13/47 94/-35\\$/47 Date Dayline Phone # 0063163