


FILE NOW: FILING FEE IS \$61.25

FILED

May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736985** (3)

1. Corporation Name

FIRST CHURCH OF GOD OF PENSACOLA, INC.



Principal Place of Business 9250 COVE AVENUE PENSACOLA FL 32534-1621	Mailing Address 9250 COVE AVENUE PENSACOLA FL 32534-1621
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3. Date Incorporated or Qualified 10/07/1976	3a. Date of Last Report 05/17/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	4. FEI Number 59-6587740	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MORGAN, PAULETTE
1348 MARANATHA WAY
PACE FL 32571**

10. Name and Address of New Registered Agent

81 Name morgan, Charles
82 Street Address (P.O. Box Number is Not Acceptable) 1348 maranatha way
83 City Pace
84 State FL
85 Zip Code 32571

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: *Charles W. Morgan* DATE: **5/4/97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE AC	<input type="checkbox"/> DELETE	1.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORGAN, PAULETT		1.2 NAME Charles Morgan	
STREET ADDRESS 1348 MARANATHA WAY		1.3 STREET ADDRESS	
CITY - ST - ZIP PACE FL		1.4 CITY - ST - ZIP	
TITLE S	<input type="checkbox"/> DELETE	2.1 TITLE To Krause	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MORGAN, PAULETTE		2.2 NAME	
STREET ADDRESS 1348 MARANATHA WAY		2.3 STREET ADDRESS 50 Teakwood	
CITY - ST - ZIP PACE FL		2.4 CITY - ST - ZIP Pensacola, FL 32506	
TITLE TD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCGRADY, D GAIL		3.2 NAME	
STREET ADDRESS 346 PINE RIDGE CIRCLE		3.3 STREET ADDRESS	
CITY - ST - ZIP PENSACOLA FL		3.4 CITY - ST - ZIP	
TITLE EMD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME MCGRADY, T S		4.2 NAME	
STREET ADDRESS 6 DELUNA DR.		4.3 STREET ADDRESS	
CITY - ST - ZIP PENSACOLA FL 32528		4.4 CITY - ST - ZIP	
TITLE EMD	<input type="checkbox"/> DELETE	5.1 TITLE Dorian Krause	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SCHULTZ, MELINDA		5.2 NAME	
STREET ADDRESS 9260 COVE AVENUE		5.3 STREET ADDRESS 23 Starhill Drive	
CITY - ST - ZIP PENSACOLA FL		5.4 CITY - ST - ZIP Milton, FL 32570	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE EMD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME David Eisenheim	
STREET ADDRESS		6.3 STREET ADDRESS 2813 E. Strong St.	
CITY - ST - ZIP		6.4 CITY - ST - ZIP Pensacola, FL 32503	

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 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: *Charles W. Morgan* DATE: **5/4/97**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # **0073415**

CR2E037 (9/96)