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Apr 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737835 (9)
1. Corporation Name
CHURCH OF GOD IN CHRIST OF LUMBERTON, INC.



Principal Place of Business Mailing Address
LUMBERTON ROAD LUMBERTON ROAD
PO BOX 1482 PO BOX 1482
ZEPHYRHILLS FL 33539-1482 ZEPHYRHILLS FL 33539-1482

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

3. Date Incorporated or Qualified 01/14/1977 3a. Date of Last Report 03/21/1996
4. FEI Number 50-1440061 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent
COOPER KING, D
701 PENNSYLVANIA ST
APT. 309
PLANT CITY FL 33566
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Carlton M Cooper Jr D
NAME	COLEMAN, BEULAH	1.2 NAME	1203 W Bates St
STREET ADDRESS	20631 WORMACK RD	1.3 STREET ADDRESS	Plant City, FL 33566
CITY - ST - ZIP	LACOOCHEE FL	1.4 CITY - ST - ZIP	
	<input type="checkbox"/> DELETE	2.1 TITLE	David Jones D
TITLE	SD	2.2 NAME	1125 Callaway Road
NAME	BROWN, GLORIA J	2.3 STREET ADDRESS	Lakeland FL
STREET ADDRESS	801 W. MADISON STREET	2.4 CITY - ST - ZIP	
CITY - ST - ZIP	PLANT CITY, FL 0	3.1 TITLE	
	<input type="checkbox"/> DELETE	3.2 NAME	
TITLE	VD	3.3 STREET ADDRESS	
NAME	BROCKINGTON, MACK	3.4 CITY - ST - ZIP	
STREET ADDRESS	2907 CHURCH ROAD	4.1 TITLE	
CITY - ST - ZIP	ZEPHYRHILLS, FL 0	4.2 NAME	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
TITLE	D	4.4 CITY - ST - ZIP	
NAME	PICKETT, LEON	5.1 TITLE	
STREET ADDRESS	2900 WHITE AVE.	5.2 NAME	
CITY - ST - ZIP	ZEPHYRHILLS FL	5.3 STREET ADDRESS	
	<input checked="" type="checkbox"/> DELETE	5.4 CITY - ST - ZIP	
TITLE	PTD	6.1 TITLE	
NAME	MCKENZIE, EVANTHONY	6.2 NAME	
STREET ADDRESS	6579 FOXTREE LANE	6.3 STREET ADDRESS	
CITY - ST - ZIP	LAKELAND FL	6.4 CITY - ST - ZIP	
	<input type="checkbox"/> DELETE		
TITLE	D		
NAME	SAMPSON, OLLIE M		
STREET ADDRESS	7427 LENA CIRCLE		
CITY - ST - ZIP	ZEPHYRHILLS FL		
	<input type="checkbox"/> DELETE		

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

CR2E037 (9/96)

[Handwritten Signature] 4/2/97