# FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

**APPROVED AND FILED**

**95 FEB 16 AM 11:24**

**SECRETARY OF STATE TALLAHASSEE, FLORIDA**

DOCUMENT # 740232 (4)

1. Corporation Name
**CHURCH OF THE INTERCESSION**

| Principal Place of Business | Mailing Address |
|---|---|
| 501 NORTHWEST 17TH STREET<br>FORT LAUDERDALE FL 33311 | 501 NORTHWEST 17TH STREET<br>FORT LAUDERDALE FL 33311 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/23/1977
3a. Date of Last Report: 03/24/1994
4. FEI Number: 59-1458859 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

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

**9. Name and Address of Current Registered Agent**

MCKIBBEN, BOBBY G
520 NW 40TH ST
FT LAUDERDALE FL 33301

**10. Name and Address of New Registered Agent**

81 Name: Davidson, Allan R.
82 Street Address (P.O. Box Number is Not Acceptable): 1416 N.E. 27 DR
83
84 City: WILTON MANORS FL 85 Zip Code: 33334

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Allan R. Davidson ALLAN R. DAVIDSON February 10, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when name/title) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE | D | 11 TITLE | T | ☒ Change ☐ Addition |
| NAME | TUCKETT, NORMAN | 12 NAME | SAVARESE, CAROL | |
| STREET ADDRESS | 111 NORTH GORDON RD | 13 STREET ADDRESS | 4571 N.W. 67 PL LOT P16 | |
| CITY-ST-ZIP | FT LAUDERDALE FL | 14 CITY-ST-ZIP | COCONUT CREEK, FL 33073 | |
| TITLE | D | 21 TITLE | S | ☐ Change ☒ Addition |
| NAME | GREEN ROWENA | 22 NAME | McKIBBEN, YVONNE | |
| STREET ADDRESS | 741 CAROLINA AVE | 23 STREET ADDRESS | 520 N.W. 40 ST. | |
| CITY-ST-ZIP | FT LAUDERDALE FL | 24 CITY-ST-ZIP | FT. LAUDERDALE, FL 33309 | |
| TITLE | D | 31 TITLE | D | ☐ Change ☒ Addition |
| NAME | WILLIAMS, MARY | 32 NAME | McKIBBEN, BOBBY | |
| STREET ADDRESS | 3301 NW 15TH PL | 33 STREET ADDRESS | 520 N.W. 40 ST. | |
| CITY-ST-ZIP | FT LAUDERDALE FL | 34 CITY-ST-ZIP | FT. LAUDERDALE, FL 33309 | |
| TITLE | | 41 TITLE | P/D | ☐ Change ☒ Addition |
| NAME | | 42 NAME | DAVIDSON, ALLAN R. | |
| STREET ADDRESS | | 43 STREET ADDRESS | 1416 N.E. 27 DR | |
| CITY-ST-ZIP | | 44 CITY-ST-ZIP | WILTON MANORS, FL 33334 | |
| TITLE | | 51 TITLE | | ☐ Change ☐ Addition |
| NAME | | 52 NAME | | |
| STREET ADDRESS | | 53 STREET ADDRESS | | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | | |
| TITLE | | 61 TITLE | | ☐ Change ☐ Addition |
| NAME | | 62 NAME | | |
| STREET ADDRESS | | 63 STREET ADDRESS | | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:** Allan R. Davidson ALLAN R. DAVIDSON, Feb. 10, 1995 305-763-5986
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

05A064