

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **740232** (4)
1. Corporation Name
CHURCH OF THE INTERCESSION

Principal Place of Business Mailing Address
501 NORTHWEST 17TH STREET **501 NORTHWEST 17TH STREET**
FORT LAUDERDALE FL 33311 **FORT LAUDERDALE FL 33311**

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

3. Date Incorporated or Qualified 09/23/1977	Applied For
4. FEI Number 59-1458859	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. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent LANDERS, JOHN 2131 N 53RD AVE HOLLYWOOD FL 33021	10. Name and Address of New Registered Agent 81 Name Gladys H. Dennis 82 Street Address (P.O. Box Number is Not Acceptable) 1010 S. Ocean Blvd. 83 # 1116 84 City Pompano Bch. FL 85 Zip Code 33062
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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 *Gladys H. Dennis* DATE *March 1, 1998*
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SAVARESE, CAROL	1.2 NAME	
STREET ADDRESS	4571 NW 67 PL	1.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	LOUDERBACK, JOAN	2.2 NAME	
STREET ADDRESS	1201 NE 155TH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BEACH FL	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WILLIAMS, MARY	3.2 NAME	
STREET ADDRESS	3301 NW 15TH PL	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE	☒ DELETE	4.1 TITLE	D Janice Baker ☐ Change ☒ Addition
NAME	HALE, MARILYN	4.2 NAME	550 A NW 18th St.
STREET ADDRESS	3431 MCKINLEY ST	4.3 STREET ADDRESS	Ft. Laud. FL 33311
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	
TITLE	☒ DELETE	5.1 TITLE	PD Gladys H. Dennis ☐ Change ☒ Addition
NAME	LANDERS, JOHN	5.2 NAME	1010 S. Ocean Blvd.
STREET ADDRESS	2131 N 53RD AVE	5.3 STREET ADDRESS	# 1116 Pompano Bch. FL
CITY-ST-ZIP	HOLLYWOOD FL	5.4 CITY-ST-ZIP	33062
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BANKS, VALARIE	6.2 NAME	
STREET ADDRESS	1640 NW 25TH AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	6.4 CITY-ST-ZIP	

14. I 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: *Carol E. Savarese Treasurer* DATE *March 1, 1998*

CFE037 (10/97)