## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT #** 

744873

111

| 1. Corporation Name   |                                 |                               |                    |   |                            |                                 |  |                |                     |                      |             |  |  |
|---|---------------------------------|-------------------------------|--------------------|---|----------------------------|---------------------------------|--|----------------|---------------------|----------------------|-------------|--|--|
| CHRIST TEMPLE PENTECOSTAL IN JESUS ONLY CHURCH, INC.  |                                 |                               |                    |   |                            |                                 |  |                |                     |                      |             |  |  |
| Principal Place of Business Mailing Address   |                                 |                               |                    |   |                            |                                 | ng Address                             |                |                     |                      |             |  | ı razist tarık enek erek filder tarir tabba izir eksif bibir bibir bibis eliki bibir |
| 2151-SOUTH 78TH ST.<br>TAMPA FL 33618   |                                 |                               |                    |   |                            | P.O. BOX 4030<br>TAMPA FL 33677 |  |                |                     |                      |             |  | 3. Date Incorporated or Qualified 11/08/1978   |
| us  |                                 |                               |                    |   |                            | us                              |  |                |                     |                      |             |  | 4. FEI Number Applied For  |
|   |                                 |                               |                    |   |                            |                                 |  |                |                     |                      |             |  | <b>59-2345186</b> Not Applicable   |
| _   | 2. Principal Place of Business  |                               |                    |   |                            |                                 | 2e. Mailing Address                    |                |                     |                      |             |  | 5. Certificate of Status Desired \$8.75 Additional                                   |
| 21  | Suite, Apt. #, etc.             |                               |                    |   |                            | Suite, Apt. W, etc.             |  |                |                     |                      |             |  | Fee Required   |
| 22  | Soile, Apt. #, etc.             |                               |                    |   |                            | 27                              |  |                |                     |                      |             |  | 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees   |
|   | City & State                    |                               |                    |   |                            | City & State                    |  |                |                     |                      |             |  | 7. Is this nonprofit corporation a homeowners association?                           |
| 23  |                                 |                               |                    |   |                            | 28                              |  |                |                     |                      |             |  | Yes No   |
| Zi  | р                               | Country                       |                    |   |                            |                                 |  |                |                     | Country              |             |  | 8. This corporation owes or has paid the current year intangible                     |
| 24  |                                 |                               | 25                 |   | 29                         | _                               |  | 3              | 10                  |                      |             |  | Personal Property Tax due June 30. Yes No  |
|   |                                 | 9. Name                       | eno                | Address of Curr                           | ent Regis                  | PIGI                            | ed Agent                               | ——             |                     | 81                   | Name        |  | 10. Name and Address of New Registered Agent   |
| INDENNAD PRINCES  |                                 |                               |                    |   |                            |                                 |  |                | 1                   |                      |             |  |  |
| UNDERWOOD, FRANCES 2110 CHERRY STREET   |                                 |                               |                    |   |                            |                                 |  |                | 82                  | Street               | Addre       | ress (P.O. Box Number is Not Acceptable) |  |
| TAMPA FL 33607  |                                 |                               |                    |   |                            |                                 |  |                |                     | 63                   |             |  |  |
|   |                                 |                               |                    |   |                            |                                 |  |                | l                   | 84                   | City        |  | FL 85 Zip Code   |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Sta |                                 |                               |                    |   |                            |                                 |  |                |                     | ove                  | -named      | corpo                                    | poration submits this statement for the purpose of changing its registered           |
|   | office or re<br>agent. I ar     | egistered aç<br>rı familiar w | jent, e<br>ith, ar | or both, in the Sta<br>nd accept the obli | ite of Flori<br>igations c | ida.<br>of, S                   | . Such change was<br>section 617.0503, | s aut<br>Flori | thorized<br>da Stat | d by<br>utes         | the cor     | poratio                                  | tion's board of directors. I hereby accept the appointment as registered             |
| l   | JATURE _                        |                               |                    | •   | _                          |                                 |  |                |                     |                      |             |  |  |
|   |                                 | Signature, typed              | or prin            | ligd name of registered a                 |                            |                                 |  | IOTE: F        |                     | Ager                 | nt signatur | e required                               | red when reinstaling) DATE   |
| 12.   |                                 | DP                            |                    | OFFICERS A                                | NO DIREC                   | CIC                             | DELETE                                 |                | 13.                 | TI E                 |             | 1707                                     | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                    |
| NAME  | Ì                               | <del>-</del>                  | NOO                | n EDANCES                                 |                            |                                 | L. Detter                              |                | 1.2 NA              |                      |             | 171                                      | WHOVINDA FRANCES   |
|   | EET ADDRESS 2110 CHERRY STREET  |                               |                    |   |                            |                                 |  |                |                     | 1.3 STREET ADDRESS 2 |             | 12                                       | 2110 CHERRY STREET   |
| i   | -ST-ZIP TAMPA FL                |                               |                    |   |                            |                                 |  |                |                     | 1.4 CITY-ST-ZIP      |             | T  | AMPA FL. 33609   |
| TITLE   | SI-ZIF                          | DS                            |                    |   |                            |                                 | DELETE                                 |                | 2.1 711             |                      | - ZIF       | DŚ                                       |  |
| NAME  |                                 | PITTMAI                       | N. AP              | NNIE                                      |                            |                                 |  |                | 2.2 N               |                      |             | Pit                                      | TTMAN ANNE   |
| STREET  | REET ADDRESS 8324 ENDIVE AVENUE |                               |                    |   |                            |                                 |  |                | 2.3 ST              | 2.3 STREET ADDRESS 2 |             | 83                                       | 324 ENGIUG AUE NUE   |
| CITY-S  | Y-ST-ZIP TAMPA FL               |                               |                    |   |                            |                                 |  |                |                     | 2.4 CITY-ST-ZIP 7    |             | Tr                                       | HAMPA FL 33619   |
| TITLE   |                                 | DP                            |                    |   |                            |                                 | DELETE                                 |                | 3.1 711             | ILE                  |             | DP                                       | Change ☐ Addition  |
| NAME  | - 1                             | HYLTON                        |                    |   |                            |                                 |  |                | 3.2 NA              | ME                   |             | HY                                       | 11 TON WILLIAMS  |
| STREET  | ADDRESS                         |                               |                    | erry St.                                  |                            |                                 |  |                | 3.3 ST              | REET                 | address     |  | 10 W cherry ST   |
| CITY-S  | ST-ZIP                          | TAMPA                         | <u>FL</u>          |   |                            |                                 |  |                | 3.4. C              | $\overline{}$        | T-ZIP       |  | TAMPA F1 33607   |
| TITLE   |                                 | DS                            |                    |   |                            |                                 | DELETE                                 |                | 4.1 TH              |                      |             | DS                                       |  |
| NAME  |                                 | AMMIE I                       |                    |   |                            |                                 |  |                | 4. 2 N              |                      |             | An                                       | mmie Phillips  |
|   | T ADDRESS                       | 2110 W.                       |                    | ERY SI.                                   |                            |                                 |  |                |                     |                      | ADORESS     | 21/1                                     | 10 Cherry ST   |
| CITY-S  | ST - ZIP                        | TAMPA                         | <u>FL</u>          |   |                            |                                 | DELETE                                 |                | 4.4 Cf<br>5.1 Tf    |                      | -ZIP        | 1/                                       | Change Addition  |
|   | l                               | C                             | Ott                | ICK                                       |                            |                                 | ☐ OELETE                               |                | 5.1 III             |                      |             | RA                                       | onitz oulck  |
| NAME  |                                 | BONITZ,                       |                    | O DRIVE                                   |                            |                                 |  |                |                     |                      | 4000t00     |  | 702 TUPELO DRIVE   |
| í   | T ADDRESS                       | TAMPA                         |                    | O DUILE                                   |                            |                                 |  |                | •                   |                      | ADDRESS     | 7  | TANIPA EL  |
| TITLE   | SI-ZIP                          | CT                            | <u> </u>           |   |                            | —                               | DELETE                                 |                | 5.4 CT<br>6.1 TI    |                      | - ZIP       | T  | At   |
| MAME  | {                               | RAYMOI                        | N SM               | IITH                                      |                            |                                 |  |                | 62 NA               |                      |             | CT                                       | DUMPA! CHILLTH   |

6.4 CITY-ST-ZIP 14. 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 supplied 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attechment with an address.

6.3 STREET ADDRESS

STREET ADDRESS

7450 35 ST. NORTH APT. 804

SIGNATURE:

**FILED** 

Feb 10 1998 8:00am

Secretary of State