

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 9:12

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 747914 (0)

1. Corporation Name

**FAITH TEMPLE, CHURCH OF GOD IN CHRIST NO. 1, INC
ORPORATED**

Principal Place of Business

**1520 NW 78TH ST
MIAMI FL 33147**

Mailing Address

**1520 NW 78TH ST
MIAMI FL 33147**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/02/1979

3a. Date of Last Report

04/05/1994

4. FEI Number

65-0319107

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

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**DYKES, FREDDIE LEE (ELDER)
1520 N.W. 79
MIAMI FL 33142**

10. Name and Address of New Registered Agent

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 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

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when reinstating.

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
GAINES, JACQUELYN
18830 NW 44TH CT
MIAMI, FL 0**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
FUDGE, CARRIE
7721 NW 10TH AVE
MIAMI, FL 0**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PD
DYKES, FREDDIE LEE
1781 NW 51ST TERR
MIAMI, FL 0**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
DYKES, SAMMIE L.
1781 NW 51ST TERRACE
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
GAINES, WILLIE
1781 NW 51ST TERRACE
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☒ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

**18830 N.W. 44th Court
MIAMI, FL 33055**

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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Freddie Lee Dykes - 4-27-95
Signature and typed or printed name of signing officer or director
Date
Typed Name
305 696-4994

0000308