


FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT. 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED

98 MAY 29 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #
1. Corporation Name

YOUTH CRUSADE FOR CHRIST DELIVERANCE CHURCH INC.

Principal Place of Business
PROFESSIONAL STUDIOS
3996 NW 167TH STREET
OPA LOCKA, FL. 33054

Mailing Address
P.O. BOX 472615
MIAMI, FL. 33247

3. Date Incorporated or Qualified
09/14/1979

4. FEI Number
59-1619942

Applied For
Not Applicable

2. Principal Place of Business
21 3996 NW 167 STREET

2a. Mailing Address
26 P.O. BOX 472615

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

Suite, Apt. #, etc.
22 3996

Suite, Apt. #, etc.
27 N/A

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

City & State
23 OPA LOCKA, FLORIDA

City & State
28 MIAMI, FLORIDA

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

Zip
24 33054

Country
25 U.S.A.

Zip
29 33247

Country
30 U.S.A.

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

WASHINGTON, LARRY
6283 NW 201 TERRACE
MIAMI, FL. 33056

10. Name and Address of New Registered Agent

WASHINGTON, LARRY
16230 SW 106 AVENUE

REINSTATEMENT
TS 6/2

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 obligation of, Section 617.0503, Florida Statutes.

SIGNATURE: Larry R. Washington, President

DATE: 5/24/98

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
WASHINGTON, LARRY
6283 NW 201 TERRACE
MIAMI, FL. 33056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V/D
WASHINGTON, LINDA
6283 NW 201 TERRACE
MIAMI, FL. 33056

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MILBROOK, LOU H.
2981 NW 57TH STREET
MIAMI, FL. 33142

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BURKES, LARRY
2323 NW 52 STREET
MIAMI, FL. 33147

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
COOK, LAWRENCE MAURICE
6600 NW 1ST PLACE
MIAMI, FL.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/D
CALDWELL, JUANITA
3231 NW 198 STREET
MIAMI, FL.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
P/D
WASHINGTON, LARRY
16230 SW 106 AVENUE
MIAMI, FL. 33157

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
V/D
NONE
000002548880-00
-06/05/98-01068-003
****428.75 ****428.75

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
S/D
MILBROOK, LOU H.
2981 NW 57TH STREET
MIAMI, FL. 33142

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
D
SANDERS, DENISE A.
2935 NW 87 TERRACE
MIAMI, FL. 33157

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
D
WASHINGTON, CAROLYN
16230 SW 106 AVENUE
MIAMI, FL. 33157

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
D
EDWARDS, ALFONSO
1770 NW 76 STREET
MIAMI, FL. 33147

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: Larry R. Washington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: 3/8/98 (305) 620-1001
Daytime Phone #

CR2E037 (10/97)