

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 13 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 # **751689** (1)
1. Corporation Name:
INTERNATIONAL CHURCH OF THE GOLDEN KEYS INC.

Principal Place of Business 10611 BAYSHORE RD. NORTH FORT MYERS FL 33917	Mailing Address 10611 BAYSHORE RD. NORTH FORT MYERS FL 33917
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3. Date Incorporated or Qualified

03/25/1980

4. FEI Number

59-1997282

Applied For
Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

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

10. Name and Address of New Registered Agent

**HALE, NORMAN F
10611 BAYSHORE RD.
N FT MYERS FL 33917**

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 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

Signature typed for printed name of registered agent and filed if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HALE, NORMAN F.	
STREET ADDRESS	10611 BAYSHORE RD.	
CITY-ST-ZIP	N FT MYERS FL 33917	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	HALE, JANET L.	
STREET ADDRESS	10611 BAYSHORE RD.	
CITY-ST-ZIP	N FT MYERS FL 33917	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	HALE, ROGER S.	
STREET ADDRESS	10611 BAYSHORE RD.	
CITY-ST-ZIP	N. FT. MYERS FL 33917	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LUKE, HELEN	
STREET ADDRESS	1813 HIGH ST	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CLAUS, GORDON,	
STREET ADDRESS	4291 WOODBRIER DR.	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CLAUS, HELEN,	
STREET ADDRESS	4291 WOODBRIER DR.	
CITY-ST-ZIP	FT. MYERS FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	ASST. STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	NEVISON ELIZABETH A.	
1.3 STREET ADDRESS	10611 BAYSHORE RD.	
1.4 CITY-ST-ZIP	N. FT. MYERS FL 33917	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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:

Rev. Norman F. Hale

Feb. 4, 1998

CR2E037 (10/97)