2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 02, 2004 08:00 AM **DOCUMENT # 754656 Secretary of State** 1. Entity Name THE DELAND GOSPEL HALL ASSEMBLY, INC. Principal Place of Business Mailing Address FRED W. KING 215 LAKE TALMADGE RD DELAND FL 32724 109 EAST ROSEHILL **DELAND FL 32724-2345** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Act. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-6585245 Not Applicable \$8.75 Additional Zip Country Zio Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KING, FRED W 215 LAKE TALMADGE RD Street Address (P.O. Box Number is Not Acceptable) DELAND FL 32724 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and fille ir applicable (NOTE, Registered Agent signature required when reinstaling) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Toust Fund Contribution Added to Fees Florida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TRUE ☐ Change ☐ Addition TIRLE ORSINI, ANTHONY NAME NAME U00000029835 36 VIRGINIA AVE STREET ADDRESS STREET ADDRESS 02/04/04-80083-007 80.00 DELAND FL 32724 CITY-ST-ZIP CITY-ST-ZIP D Change Addition. ☐ Delete THLE TITLE HAAN, ERVIN J. NAME NAME 6850 N. COCOA BLVD. #505 STREET ADDRESS STREET ADDRESS COCOA FL CITY-ST-ZIP CITY+ST-ZIP DMPT Delete ☐ Change TITLE ☐ Addition TITLE KING, FREDERICK W MARKE MARKE 215 LAKE TALMADGE RD STREET ADDRESS STREET ADDRESS DELAND FL 32724 CITY-ST-ZIP CITY-ST-ZIP DVS Change ☐ Addition THIE Delete TIRE CREED, HUBERT A NAME NAME 3044 TUCKAHOE LANE STREET ADDRESS STREET ACCRESS DELAND FL 32724 CSTY-ST-7/P CITY-ST-Z₩ Change Addition Delete TITLE mile NAME NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change: Addition Oelete TITLE TELE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED