FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCU	MENT # 7	56772	(0)							
FIRST UNITED PENTECOSTAL CHURCH, INC.										
Principal Place of Business Mailing Address								LOI OLOIS DIDİL		I ATSIL BİĞKI YÜĞI
% LARRY G 3196 COUNT NAPLES FL	TY BARN ROAD	3	% Larry G Sims 3196 County Barn Road Naples Fl 33962							
							Date Incorporated or Qualified 03/13/1981	3a. Date	of Last 4/26/1	Report 1995
2. Principal P	lace of Business	 -	2a. Mailing Address 26				4. FEI Number Applied For			Applied For
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			Certificate of Status Desired			Not Applicable 5 Additional	
City & Stat	e	27	City & State			Election Campaign Financing	<u> </u>		Required	
Zip	Count	[28]	Zip Country				Trust Fund Contribution Added to Fees			
24	25		29 30		niry		6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Addr	ess of Current Regist	ered Agent		B1	Name	10. Name and Address of New Re	pistered Ag	ent	
SIMS, LARRY G										
	OUNTY BARN ROAD					Street Addr	ess (P.O. Box Number is Not Acceptable			
NAPLES	S FL 33962		8							
				ŀ	84	City			85 Zip	p Code
11. Pursuant	to the provisions of Sect	ions 617.0502 and 617	.1508, Florida Statut	es, the abo	ve-na	amed corpor	ation submits this statement for the purpo	FL se of chance	ning its r	registered office
or register familiar wi	red agent, or both, in the ith, and accept the oblig	State of Florida. Such ations of, Section 617.0	change was authoriz 503, Florida Statutes	zed by the o s.	orpo	ration's boar	d of directors. I hereby accept the appoin	tment as re	gistered	agent. I am
SIGNATURE	Signature, typed or printed name									
12.		OFFICERS AND DIRECT		13.	Agent	signature required	when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND O	EECTC	1RS IN 12
THILE	VD		DELETE	1.1 TiT	LE				Change	Addition
NAME	WILSON, DAVID I			1.2 NA	ME					—
STREET ADORESS CITY-ST-ZIP	1364 14TH AVE I NAPLES, FL 0000					address				
TITLE	PD PD		DELETE	1.4 C(1 2.1 T(1		- ZIP			Change	Addition
NAME	SIMS, LARRY G			2.2 NA					Citatine	
STREET ADDRESS	3196 COUNTY B/					ADDRESS				
CITY-ST-ZIP	NAPLES, FL 0000	0		2.4 CI	TY-S1	r- 21P				
THTLE	STD		DELETE	3 1 TIT	LE				Change	Addition
NAME STREET ADDRESS	LOCKE, CAREY 4675 32ND AVE.	C/M		3 2 NA		-				
CITY-ST-ZIP	NAPLES, FL 0000					ADDRESS				
TITLE	<u></u>	<u> </u>	DELETE	3.4. CF 4.1 TiT	_	-ZIP			Change	Addition
NAME			_	4. 2 NA				ابا	nimi	[1] Modition
STREE1 ADDRESS						ADDRESS				
CITY-ST-ZIP				4.4 CIT	Y-ST-	ZIP				
TITLE			DELETE	5.1 TIT	LE				Change	■ Addition
NAME				5.2 NAI	ME					
STREET ADDRESS						DDRESS				
CITY-ST-ZIP TITLE			DELETE	5 4 C/T		·ZIP			<u> </u>	
NAME			Detter	6.1 TIT(j		LI	Change	☐ Addition
STREET ADDRESS						DDRESS .				ŀ
CITY-ST-ZIP				6.4 CIT	Y-ST-	ZIP				
14. I do hereb	y certify that the informa	t on supplied with this file	ing is voluntarily furn	ished and n	hac	not qualify to	r the exemption stated in Section 119.07	(3)(k), Florida	a Statute	es. I further
oath; that		or of the comporation or t	or supplemental ann he receiver or to isto	an report is			r the exemption stated in Section 119,07 e and that my signature shall have the sa report as required by Chapter 617, Florid			

CR2E037 (12/95)

SIGNATURE: LARRY CO. S. M.S. SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICEA OPT 2-5-96 941-774-7703