FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

756772

(0)

FIRST UNITED PENTECOSTAL CHURCH, INC.

FILED Jan 22 1998 8:00am Secretary of State

rincipal Place of Business	Mailing Address	I LOURTH EMBON WHAT MINE TO SELECTED HERE	I contict tander divine milit; longis tangs tine ment along 4/61 along 4/61 along 1887 along 1887		
6 LARRY G SIMS 196 COUNTY BARN ROAD APLES FL 33962	% LARRY G SIMS 3196 COUNTY BARN ROAD	3. Date Incorporated or Qualified 03/13/1981	! ·		
AFLES FL 33902	NAPLES FL 33962	4. FEI Number	Applied For		
		59-1754556	Not Applicable		

							00 110 1000
2. 21	Principal Place of Busin	ness	2a 26	. Mailing Address			5. Certificate of Status Desired \$8.75 Additional Fee Required
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.		:	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	City & State		28	City & State	-		7. Is this nonprofit corporation a homeowners association?
24	Zip	Country 25	29	Zip Cor	untry		8. This corporation owes or has pald the current year intangible Personal Property Tax due June 30. Yes 2700
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent
OBIO LIADOVIO					81		ess (P.O. Box Number is Not Acceptable)

3916 COUNTY BARN ROAD 83 NAPLES FL 33962

Zip Code

office or r	to the provisions of Sections 617,0502 and 617,150 egistered agent, or both, in the State of Florida. Suc m familiar with, and accept the obligations of, Secti	ch change was au	thorized by the corporati	pration submits this statement for ion's board of directors. I hereby	or the purpose of changing it accept the appointment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered agent and tille if applica	phia (NOTE: I	Registered Agent signature requin		DATE	
12.	OFFICERS AND DIRECTORS		13.		OFFICERS AND DIRECTOR	S IN 12
TITLE	VD	DELETE	1.1 TITLE	7.0017.01.0701.17.14.02.0 10	Change	Addition
NAME	WILSON, DAVID L	_	1.2 NAME			
STREET ADDRESS	1364 14TH AVE N		1.3 STREET ADDRESS	1		
CITY-ST-ZIP	NAPLES, FL 00000		1.4 CITY-ST-ZIP			
TITLE	PD	DELETE	2.1 TITLE		Change	Addition
NAME	SIMS, LARRY G	_	2.2 NAME			
STREET ADDRESS	3196 COUNTY BARN RD		2.3 STREET ADDRESS	: :		
CITY-ST-ZIP	NAPLES, FL 00000		2. 4 CITY-ST-ZIP		i .	
TITLE	STD	☐ DELETE	3.1 TITLE		Change	Addition
NAME	LOCKE, CAREY		3.2 NAME		•	
STREET ADDRESS	4675 32ND AVE. SW		3,3 STREET ADDRESS			
CMY-ST-ZIP	NAPLES, FL 00000		3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	! 	,	
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		1	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETÉ	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-7IP			R & CITY_ST_7IP	!		

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 ocproration 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 charged, or on an attachment with an address.

SIGNATURE: