NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 05, 1999 8:00 am § Secretary of State

03-05-1999 90107 020 \*\*\*\*70.00

## **DOCUMENT # 758310**

1. Corporation Name

CHURCH OF GOD IN CHRIST OF SANFORD, FLORIDA. INC

Principal Place of Business 1826 JERRY AVE

Mailing Address HENRY BRADLEY SR.

1826 JERRY / #1826 SANFORD FL		HENRY BRADLEY SR. 2250 W.AIRPORT BLVD SANFORD FL 32771			
2. Principal Place of Business 2a. Mailing Address 21/836 Joyny AUC 261150 W. AiTPO			4 BLUD	3. Date incorporated or Qualified 05/12/1981	· ·
Suite, Apt. #, etc. Sui		Suite, Apt. #, etc.		4. FEI Number 05-0021169	Applied For
22		27			Not Applicable
City & Sta	ate Florida	City & State  28 Sanford F	lai	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip 24 32 51	Country  25 CEMINDIC	Zip	Country SEM, NOLC	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
- 5-7	9. Name and Address of Curren			10. Name and Address of New Registered	Agent
BRADLEY, HENRY SR 2250 W. AIRPORT BLVD. SANFORD FL 32771			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City Carrold FL 85 Zip Code 32 57/		
) office or	registered agent, or both, in the State am familiar with, and accept the obligation	of Florida. Such change was autr ions of, Section 617.0503, Florid	nonzed by the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint of the purpose of the p	omitment as registered
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	SD	☐ DELETE	1.1 TITLE	~	☐ Change ☐ Addition
NAME	BARNES, MABLE		1.2 NAME		
STREET ADDRESS	ACCULATION OF		1.3 STREET AODRESS		•
CITY-ST-ZIP	SANFORD FL		1.4 CITY-ST-ZIP		
TIT 5	CD	[ ] DÉLETE	21 TILE '		☐ Change ☐ Addition

BRADLEY, HENRY 2.2 NAME NAME 2250 W.AIRPORT BLVD 2.3 STREET ADDRESS STREET ADDRESS SANFORD FL 32771 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE TITLE 3.1 TITLE PERRY, DOROTHY 3.2 NAME NAME 710 SANTA BARBARA DR 3.3 STREET ADDRESS STREET ADDRESS SANFORD FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE Bradley, Clara L 4.2 NAME NAME AIRPORT BLVD 2250 W 4.3 STREET ADDRESS 250 W STREET ADDRESS SANFORD FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME **EVANS, SAMUEL** NAME 5.3 STREET ADDRESS 137 CARVER AVE STREET ADDRESS 5.4 CITY-ST-ZIP SANFORD FL CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7/P

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, with all other like empowered.