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

DOCUMENT # 763601

(2)

LAUDERDALE MANORS BAPTIST CHURCH TRUSTEES

Principal Place of Business Mailing Address						I CORESTA SORAN DICORD CONTO BITTIN DOLDAY I	IDI DIDIL BIDIL BIDIL DI	YAN BIYAN BUYAH KOBI
1122 NW 9TH	AM J.CAMPBELL H AVE. DALE FL 33311	% REV.WILLIAM J.CAMPBELL 1122 NW 9TH AVE. FT LAUDERDALE FL 33311						
						3. Date Incorporated or Qualified 06/08/1982	3a. Date of Las 03/08/	
2. Principal Pl 21	lace of Business	2a. Mailing Address 26				4. FEI Number 05-0054103		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	8	City & State				Election Campaign Financing Trust Fund Contribution	□ \$5.	00 May Be
Zip	Country 25	Zíp 29	30 Cou	intry		8. This corporation has liability for int		
	9. Name and Address of Current					10. Name and Address of New Reg		
				B1	Name		,	
	ELL, REV. WILLIAM J.		82 Street Ac		Street Add	ress (P.O. Box Number is Not Acceptable)	1	
	W. 9TH AVE.				Olioci / ica.	1655 (1.10) BOX (140) TO (140) Properties of	· 	
	W. 8TH AVE.			83				
FILAUD	DERDALE FL 33311		ŀ	84	City		FI 85 2	Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Statut	es, the abo	ve-n	amed corpor	ration submits this statement for the purpo	ose of changing its	registered office
familiar wit	th, and accept the obligations of, Section	n 617.0503, Florida Statutes	eorbytne o ₃.	orpe.	oration s boar	rd of directors. I hereby accept the appoin	itment as registere	id agent. I am
SIGNATURE _								
12.	Signature, typed or printed name of registered agent a OFFICERS AND		OTE: Registered	Agent	t signature required	d when reinstating)	DATE	
TITLE	T	DELETE	1.1 70	TI F		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
NAME	PASCAL, GWENDOLYN		1.2 NA				☐ ouguse	Modellon
STREET ADDRESS	290 SW 31 AVE				ADDRESS			
CITY-ST-ZIP	FT LAUD, FL 00000		1.4 CITY-		· I			
TITLE	TD			2.1 TITLE 2.2 NAME			☐ Change	☐ Addition
NAME			2.2 NA				-	
STREET ADDRESS	1122 NW 9TH AVE		2.3 ST	REET /	ADDRESS			
CITY-ST-ZIP	FT LAUD, FL 00000		2.401	ITY-SI	I-ZIP			
TITLE	CAMPORUL DEVIMINATA I			3.1 TITLE			☐ Change	☐ Addition
NAME	CAMPBELL, REV.WILLIAM J.		3.2 NA	ME				
STREET ADDRESS	1141 N.W. 8TH AVE. FT LAUD, FL 00000				ADDRESS			
CITY-ST-ZIP TITLE	DT EXOU, FL 00000	Dones	3.4. Cr		T-ZIP	,		
NAME	GREAVES, HATTIE	DELETE	4.1 TIT				☐ Change	☐ Addition
STREET ADDRESS	3440 NW 1ST ST		4. 2 NA					
CITY-ST-ZIP	FT LAUDERDALE FL				ADDRESS			
TITLE	D	DELETE	4.4 CIT 5.1 TIT		- ZIP		☐ Change	Addition
NAME	ROUNDTREE, EARNEST	_		5.2 NAME			[_] Oliango	
STREET ADDRESS	1430 NW 55 AVE				ADORESS			
CITY-ST-ZIP	LANDERHILL FL		5.4 CIT					
TITLE	D	DELETE	6.1 TIT				☐ Change	☐ Addition
NAME	DULCIO, ELLE MAE		6.2 NA	ME			-	_
STREET ADDRESS	924 NW 11TH PLACE		6.3 STI	REET A	ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL		64 CIT	IY-ST	-ZIP			
oath; that I	. IDE IDIOTEIADOU IDOX 2000 ON TAIS ANADA	ii report or supplemental annu ation or the receiver or trustee	uai report is a ampowara	e tri la	a and accurat	or the exemption stated in Section 119.07 te and that my signature shall have the sai s report as required by Chapter 617, Floric		16

SIGNATURE: Rev. William &

April 11, 1996

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