1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # 764276**

1. Corporation Name

## THE ENGLEWOOD ASSEMBLY OF GOD, INCORPORATED

Principal Place of Business
HE) 240 NO PINE ST

240 NO PINE ST ENGLEWOOD FL 34223 Mailing Address

240 NO PINE ST

## FILED Apr 23, 1999 8:00 am § Secretary of State

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LINGLEWOOD	16 07220	LIIOLIIIOOO I L VILLE					
2. Principal P	lace of Business	2a. Mailing Address	_		3. Date Incorporated or Qualifed		
240 1	Pine St.	240 Pine St	t		07/23/1982		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		olied For
22	· · · · · · · · · · · · · · · · · · ·	27			65-0099810		Applicable_
City & State	e	City & State			5. Certifcate of Status Desired	\$8.75 A Fee Re	
Zip	Country			6. Election Campaign Financing	\$5.00	May Be	
24	25 29 30		Trust Fund Contribution Added to Fees				
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registere	ed Agent	
			8	1 Name	STEELE, DONALD R.		
etecei e	DONALD R		82 Street Address (P.O. Box Number is Not Acceptable)				
	TH PINE ST		111 Spur Drive				
BOX 10	III FINE 3!		83	3			
	000 FL 04000						
ENGLEWO	OOD FL 34223		84	4 City	Rotonda West F	L 85 Zip C	47
11 Durana-1	to the provisions of Costions 617 0502	and 617 1508 Florida Statutes	the abov	ve-named o	ornoration submits this statement for the purpose	of changing its	registered
Office of r	enistered agent or both in the State o	r Fiorida. Such chande was auvic	orizeo o	y tine corpora	ation's board of directors. I hereby accept the ap-	pointment as reg	gistered
agent. I a	m familiar with, and accept the obligati	ons of, Section 617.0503, Florida	Statute	s.			
SIGNATURE					uired when reinstating) DATE		
42	Signature, typed or printed name of registered agent OFFICERS AND		13.	ent signature req	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
12.		DELETE	1.1 TITLE		ADDITIONOSCI DINCES (O C. LICELIO	☐ Change	Addition
TITLE	PD	- Defete					
NAME	STEELE, DONALD R		1.2 NAME				
STREET ADDRESS	200 NORTH PINE ST., BOX 10		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ENGLEWOOD FL		1.4 C/TY-		. <u>_</u>		- Addition
TITLE	SD	X DELETE	2.1 TITLE			Change	Addition
NAME	BRINCKMAN, RAY	•	2.2 NAME	:			•
STREET ADDRESS	5396 CHARD TERRACE		2.3 STRE	ET ADDRESS			
-CITY ET-ZIP	ENGLEWOOD:FL-		-2:4 CITY	ST-ZIP===			
TITLE	TD	☐ DELETE	3.1 TITLE			Change	Addition
NAME	RUCKMAN, MELVIN		3.2 NAME	:			
STREET ADDRESS	674 ROTONODA CIR.		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	RONTONDA WEST FL		3.4. CITY-	-ST-ZIP			
TITLE	D	☐ DELETE	4.1 TITLE	<del></del>	SD	X Change	Addition
NAME	KONOPASEK, RAY		4, 2 NAMI	<sub>E</sub>			
STREET ADDRESS	1130 SOUTH LANE			ET ADDRESS			
	ENGLEWOOD, FL 00000		4.4 CITY-		• •		
CITY-ST-ZIP TITLE	ENGLETTOOD, FL 0000	☐ DELETE	5.1 TITLE		12	☐ Change	Addition
	,		5.2 NAME		Robert Kirk		
NAME				ET ADDRESS	1413 Sea Gull Drive		
STREET ADDRESS			5.4 CITY-		Englewood, FL. 34224		
CITY-ST-ZIP		Document	6.1 TITLE		2.30.70	☐ Change	Addition
TITLE		☐ DELETE			• •	□ change	
NAME			6.2 NAME			•	
STREET ADDRESS				ET ADDRESS		-	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP			

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.

SIGNATURE:

Son SIGNARUITE BEQUIRE Donald R. Steele

April 14, 1999