

FILE NOW: FILING FEE IS \$61.25

FILED  
May 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 764509 (6)**

1. Corporation Name  
**THE TEMPLE OF JESUS CHRIST, INC.**



Principal Place of Business <b>437 NORTHWOOD RD WEST PALM BEACH FL 33407 US</b>	Mailing Address <b>1531 DREXEL RD. LOT 344 WEST PALM BEACH FL 33417</b>
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3. Date Incorporated or Qualified <b>08/10/1982</b>	
4. FEI Number <b>59-2405455</b>	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business <b>21 4512 Pinewood Avenue</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23 West Palm Beach, FL</b>	City & State <b>28</b>
Zip <b>24 33407</b>	Country <b>25 Palm Bch</b>

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**SMITH, PASTOR MARVIN  
1531 DREXEL ROAD  
LOT 344  
WEST PALM BEACH FL 33417**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number Is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SMITH, MARVIN	
STREET ADDRESS	1531 DREXEL ROAD LOT 344	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	CARNEY, JANET	
STREET ADDRESS	1125 8TH STREET APT 1	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	POWELL, EDWARD B.	
STREET ADDRESS	3401 AVE. R.	
CITY-ST-ZIP	RIVIERA BEACH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	WILLIAMS, ANNETTE	
STREET ADDRESS	4829 NORTH BIMINI CIRCLE	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DV William Booker
2.3 STREET ADDRESS	1265 W. 34th Street
2.4 CITY-ST-ZIP	Riviera Beach, FL 33414
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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.

SIGNATURE: *MARVIN SMITH / Pastor* **4/27/98** **561-686-6315**

CR2E037 (10/97)