

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 765708 (3)
 Corporation Name
GOOD NEWS LITTLE RIVER BAPTIST CHURCH, INC.



Principal Place of Business 495 N.W. 77TH STREET MIAMI FL 33150	Mailing Address 495 N.W. 77TH STREET MIAMI FL 33150
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 11/09/1982
4. FEI Number 59-0794394
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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 JUDSON, CLYDE W., JR. 314 N.W. 108TH TERRACE MIAMI FL 33188

10. Name and Address of New Registered Agent 81 Name Clyde W. Judson, Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 20210 N.E. 10th Avenue 83 City Miami, Florida 84 City FL 85 Zip Code
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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 **Clyde W. Judson, Sr. Pastor** 3/3/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	P
STREET ADDRESS	JUDSON, CLYDE W., SR.
CITY - ST - ZIP	6444 N.W. 8TH AVE. MIAMI FL
TITLE	<input type="checkbox"/> DELETE
NAME	CD
STREET ADDRESS	JUDSON, CLYDE W. (JR)
CITY - ST - ZIP	314 N.W. 108TH TERR. MIAMI FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	D
STREET ADDRESS	COOPER, CHERRI
CITY - ST - ZIP	1737 N.W. 47TH ST. MIAMI FL
TITLE	<input type="checkbox"/> DELETE
NAME	D
STREET ADDRESS	JUDSON, EMMA
CITY - ST - ZIP	314 N.W. 108TH TERR. MIAMI FL
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	Judson, Clyde W. (Jr)
2.3 STREET ADDRESS	20210 N.E. 10th Avenue
2.4 CITY - ST - ZIP	Miami, Florida
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Church Treasurer
3.3 STREET ADDRESS	Geneva Gardner
3.4 CITY - ST - ZIP	1848 N.W. 93rd Street Miami, Fla. 33147
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D
4.3 STREET ADDRESS	Judson, Emma
4.4 CITY - ST - ZIP	20210 N.E. 10th Avenue Miami, Fla.
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Officer
5.3 STREET ADDRESS	Jack Phillip
5.4 CITY - ST - ZIP	5206 S.W. 20th Street Hollywood, Fla.
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 **Clyde W. Judson, Sr.** 3/3/98

CR2E037 (1097)