FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Scoretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

SIGNATURE:

839695

(4)

PAN-AFRICAN	ORTHODOX	CHRISTIAN	CHURCH	INC.

Principal Place	of Business	Mailing Address	****** * ****				
Principal Place of Business N 13535 LIVERNOIS DETROIT MI 48238		13535 LIVERNOIS DETROIT MI 48238	13535 LIVERNOIS				
					3. Date Incorporated or Qualified 12/21/1977	3a. Date of 04/2	Last Report 21/1995
2. Principal Pla 21	ce of Business	2a. Mailing Address 26			4. FEI Number 38-1865459		Applied Fo Not Applica
Suite, Apt. #	, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		8.75 Additiona Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30			□No	
	9. Name and Address of Curre	ent Registered Agent	81	r Kanada a a	10. Name and Address of New F	legistered Age	ent
ATD414	T DE 1110 1770		61	Name			
	RT, DELANO, ATTY		62	Street Addr	ress (P.O. Box Number is Not Acceptab	ole)	
3558 29 TAMPA,			83				
33605	TL .						
33003			84	Crty		FL	35 Zip Code
or registere familiar witt SIGNATURE	of agent, or both, in the State of FIG n, and accept the obligations of, Se Syrature typed or printed name of regioned as-	rida. Such change was author ction 607.0505, Florida Statub	ized by the corp	oration's boa	ration submits this statement for the pured of directors. I hereby accept the app	ointment as reg	istered agent. I a
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICEHS AND DI	RECTORS IN 12
TITLE	P	☐ DELFTE	1 1 1 11 1 1 5				Change 🔲 Addit
NAME	CLEAGE, ALBERT B JR		1.2 NAME				
STREET ADDRESS	13535 LIVERNOIS		1.3 STREE	I ADDRESS			
CITY-S1-ZIP	DETROIT MI		1.4 C/TY - 5	ST - 7IF	3.2-11.1.18.17	-	
TITLE	D DOMAID	DECETE	2 1 JULE			□ (Change
NAME	Lester, Donald 944 Gordon St.		2.2 NAME				
STREET ADDRESS	ATLANTA GA			TADDRESS			
CITY - ST - ZIP TITLE	D D	☐ DELFTE	24 CHY-1 3-1 HILE	\$! - 7 <u>!</u> P			Change Addit
NAME	MARTIN, BARBARA	biti'i	3 2 NAME			٠ ـــا	mange radii
STREET ADDRESS	13535 LIVERNOIS			T ADDRESS			
C-TY - ST - ZIP	DETROIT MI		3.4 CITY	Ĭ			
TITLE	\$	☐ DELETE	4. 1 TITLE	M2			Change
NAME	STEWART, DIANA		4.2 NAME				
STREET ADDRESS	13535 LIVERNOIS		4.3 STREE	F ADDRESS			
CITY - ST - 7iP	DETROIT MI		4 4 CITY -	ST - ZIP		- ALL FIFT PRINCE IN THE COLUMN	
TITLE	Ţ	DECETE	5 1 THEF				Change
NAME	KELLY, ALFRED		5.2 NAME				
STREET ADDRESS	700 SEWARD #612		53 STREE	I ADORESS			
CITY-ST-ZIP	DETROIT MI	C Driese	5 4 O TY -	S1 ZIF			Connect FT Add
TITLE		☐ DELETE	6 1 T TLF			<u>.</u> '	Change [] Add:
NAME CERCEL ADORROS			6.2 N \ M E	I MENDOCOCO			
STREET ADDRESS				LADDRESS			
CITY-ST-ZIF	v certify that the information sunctie	d with this filing is voluntarily fo	64 City - prnished and doc		for the exemption stated in Section 119	1.07(3)(k). Florid	a Statutes. I furth
certify that	the information indicated on this ar	mual report or supplemental a poration or the receiver or trus	nnual report is tr stee empowered	ue and accur-	ate and that my signature shall have the lis report as required by Chapter 607, F	e same legal effi	ect as if made un

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/96 (313)491-0777