## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **F94000005105**

THE SECT OF THE LORD JESUS CHRIST (ACTS 28:22) I **NCORPORATED** 

Principal Place of Business

Mailing Address

P.O. BOX 905 FRUITLAND PARK FL 34731 P.O. BOX 905

FRUITLAND PARK FL 34731

## **FILED** Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90030 012 \*\*\*\*61.25

|--|--|

2. Principal Pl	ace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed			
21		26		09/30/1994			
Suite, Apt.	#, etc.	Suite, Apt. #, etc		4. FEI Number	Applied For		
22		27		23-2226273	Not Applicab	le	
City & State	3	City & State		5. Certificate of Status Desired	\$8.75 Additional	·	
23		28		C. Octations of California	Fee Required	_	
Zip	Country	Zip	Country	6. Election Campaign Financing	<b>\$5.00</b> 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 Registered Agent						
			81 Name 1	Isie Ann Forte	)		
LITTLE, SH	HERROD E		82 Street Add	ress (P.O. Box Number is Not Acceptable)	·/- L	$\neg$	
40125 MAGNOLIA ST.			401	25 Magnolia	rreet.	_	
	E FL 32159		83	7 /	·		
5515.11	2 1 2 02 100	•	84 City /	1 1/	85 Zip Code		
			+a	de Lake	FL 1 32 75	-7	
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the purpoint board of directors. I hereby accept the	se of changing its registered	<b>y</b>	
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was aut res_of∈Bection 617.0503. Flori	horized by the corporation of th	on a board of directors. I hereby accept the	appointment as registered		
	7	toto Ficis	Am Follo	ST/legistered 1981	nl <del>4</del> 11.199		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Agent signature requin	80 when remisiating) ( )	ATE //		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE			
TITLE	T	DELETE	1.1 TITLE .	A PP TO THE TOTAL THE TOTAL TO THE TOTAL TOT	Change 🔲 Addi	tion	
NAME	WILSHIRE, ISAIAH		1.2 NAME				
STREET ADDRESS	RR1 BOX 220 E-E DAUGHERTY	RD.	1.3 STREET ADDRESS	Contract The Contract of the C			
CITY-ST-ZIP	EQUINUNK PA 18417		1.4 CITY-ST-ZIP			_	
TITLE ·	V	<b>▼</b> DELETE	2.1 TITLE	ice President	Change	tion	
NAME	HUMES, IMMANUEL		2.2 NAME I	axto Alfroit	•		
STREET ADDRESS	RR3 BOX 2617		2.3 STREET ADDRESS				
CITY-ST-ZIP	HONESDALE PA 18431	<b>,</b>	2.4 CITY-ST-ZIP	1/2-POX 26/16/16	/		
TITLE	ST	DELETE	3.1 TITLE	TONESCIALLY PA 1075	>/ ဩChange □ Addi	tion	
NAME	LITTLE, SHERROD		3.2 NAME	orte ElsionA	^		
STREET ADDRESS	40125 MAGNOLIA ST.		3.3 STREET ADDRESS	HOIZE manchia	T.	ļ	
CfTY-ST-ZIP	LADY LAKE FL 32159		3.4. CITY-ST-ZIP	10 / 2 / (0) FT 30	15-9		
TITLE	Π	☐ DELETE	4.1 TITLE		/ ☐ Change ☐ Addi	tion	
NAME	LUKEMAN, RACHEL A		4. 2 NAME	-			
STREET ADDRESS	<b>HC66 BOX 89 CREAMTON COR</b>	NERS RD.	4.3 STREET ADDRESS				
CITY-ST-ZIP	PROMPTON PA 18456		4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change Addi	tion	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS			ļ	
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addi	tion	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET 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 apprecia, with all other like empowered.

SIGNATURE: