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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N00952

(4)

GASKIN PENTECOSTAL CHURCH, INC.

FILED Jan 15 1998 8:00am Secretary of State

G., 15111		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Principal Plac	e of Business	Mailing Address			
% REV JOHN I	HURLEY	C/O REV. JOHN HURLEY	C/O REV JOHN HURIEY		3. Date incorporated or Qualified
RT 3 BOX 138	A	17047 STATE HIGHWAY 83 N			01/17/1984
DEFUNIAK SPR	HINGS FL 32433	DEFUNIAK SPRINGS FL 32433 US			4. FEI Number Applied For
		00			65-0029362 Not Applicable
2. Principal Place of Business 2a. Mailing Address					5. Certificate of Status Desired S8.75 Additional
21		26			Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22 City & State	<u> </u>	City & State			Trust Fund Contribution Added to Fees
23	·	28			7. Is this nonprofit corporation a homeowners association?
Zip Country		Zip Country		ntry	8. This corporation owes or has paid the current year Intangible
24	25 29 30		30		Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
				81 Name	
HURLEY, JOHN E.			ļ	82 Street Ad	dress (P.O. Box Number is Not Acceptable)
ROUTE 3, BOX 138-A				83	
DEFUNIAK SPRINGS FL 32433				63	
				64 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation					propertion 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					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.		ID DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 T(I		Change Addition
NAME	HURLEY, JOHN E.		1.2 NA	•	
STREET ADDRESS	17047 STATE HWY. 83N DEFUNIAK SPRINGS FL 324:	22	1	REET ADDRESS	
CITY-ST-ZIP TITLE			1.4 Cf1 2.1 TIT	Y-\$T-ZIP	Change Addition
NAME	HURLEY, NELLIE F.	-			Company Addition
STREET ADDRESS	AMAJE ATTEM I BARK AALI			REET ADDRESS	
CHTY-ST-ZIP	DEFUNIAK SPRINGS FL 324	33		IY-ST-ZIP	
TITLE	\$	DELETE	3.1 TIT		Change Addition
NAME	POSTON, ROBIN M.		3.2 NA	ME	
STREET ADDRESS	29 PHILLIPS RD.		3.3 ST	HEET ADDRESS	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL 324:	33	3.4. CI	ry-st-zip	
TITLE	D	☐ DELETE	4.1 10	LE	Change Addition
NAME	HOLLAND, RAY		4. 2 N/	ME	
STREET ADDRESS	P.O. BOX 414 N/A		4.3 ST	REET ADDRESS	
CITY-ST-ZIP	KINSTON AL 36453			Y-ST-ZIP	
TITLE	0	☐ DELETE	5.1 TIT		☐ Change ☐ Addition
NAME	POSTON, LUETTA		5.2 NA		
STREET ADDRESS	P.O. BOX 1035 N/A		5.3 STI	REET ADDRESS	
CITY-ST-ZIP	DEFUNIAK SPRINGS FL	[] ac. cvc		Y-ST-ZIP	AL
TITLE	D COLLAND IVEN	☐ DELETE	6.1 TIT		☐ Change ☐ Addition
NAME	HOLLAND, KEN		6.2 NA		
STREET ADDRESS	ROUTE 3, BOX 160 A.C.			REET ADDRESS	
CITY-ST-ZIP	SAMPSON AL		6.4 CIT	Y-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 suppliemental 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 any attachment with an address.

CIGNATURE.

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