

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N04135 (2)

1. Corporation Name

SAINT CITY NO. 4 CHURCH OF THE APOSTOLIC FAITH,  
INC.



Principal Place of Business

Mailing Address

C/O BISHOP JAMES P. JENKINS  
7375 NORTH AUGUSTA DRIVE  
MIAMI FL 33015-9053

C/O BISHOP JAMES P. JENKINS  
7375 NORTH AUGUSTA DRIVE  
MIAMI FL 33015-9053

3. Date Incorporated or Qualified

07/12/1984

3a. Date of Last Report

03/31/1995

4. FEI Number

59-2222883

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☒

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 9302 N.W. 22nd Ave

26 9302 N.W. 22nd Ave

Suite, Apt., #, etc.

Suite, Apt., #, etc.

22 Miami

27 Miami

City & State

City & State

23 FLA

28 FLA

Zip

Zip

24 33147

29 33147

Country

Country

25 Dade

30 Dade

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JENKINS, BISHOP JAMES P.  
3940 N.W. 196 STREET  
MIAMI FL

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TARPLEY, MOTHER CAROL  
3370 NW 212TH ST.  
MIAMI FL

JENKINS, MOTHER JENKINS  
3940 N.W. 196 STREET  
MIAMI FL

JENKINS, BISHOP J P  
3940 NW 212 ST  
MIAMI FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Bishop James P. Jenkins (President)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bishop James P. JENKINS

3-2-96

Date

1-305-693-3877

Daytime Phone #

CR2E037 (12/95)