## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N06037

(8)

## VENICE APOSTOLIC UNITED PENTECOSTAL CHURCH, INC.

## Principal Place of Business Mailing Address % EDGIL HALL 3. Date Incorporated or Qualified 2235 SEABOARD AVENUE 2235 SEABOARD AVENUE 11/07/1984 VENICE FL 34293 VENICE FL 34293 4. FEI Number Applied For 59-2469635 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 21 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes X No 28 Zφ Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 26 20 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HALL. EDGIL 82 Street Address (P.O. Box Number is Not Acceptable) 380 DORCHESTER DR 83 VENICE FL 33595 85 Zip Code 64 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition NAME WAGONER, OSCAR 1,2 NAME 5439 SYLVANIA DR. 1.3 STREET ADDRESS STREET ADDRESS NORTH PORT FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition NAME **COLE, STANLEY** 2.2 NAME 308 CHICOPA ST. STREET ADDRESS 2.3 STREET ADDRESS N.PORT FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE HALL, EDGIL NAME 3.2 NAME 380 DORCHESTER DR STREET ADDRESS 3.3 STREET ADDRESS VENICE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4 1 TITLE TITLE **VIRGIL WELLS** 4. 2 NAME NAME 71 MAGNOLIA DR 4.3 STREET ADDRESS STREET ADDRESS **ENGLEWOOD FL** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

TITLE NAME

STREET ADDRESS

Revi Edy & Hakh

Change

Addition

FILED

Mar 18 1998 8:00am

Secretary of State