FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

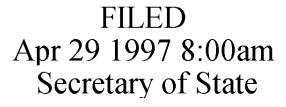
Socretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N10666

(8)

LEONARD STREET CHURCH OF GOD INC.





Principal Place of Business		Mailing Address	Mailing Address		1881/198 DDV 11814 BRICK BRICK BUILD BUILD BUILD BURK BURU BURU BURU BURU BURU BURU BURU	
835 LEONARD STREET BROOKSVILLE FL 34601		835 LEONARD STREET BROOKSVILLE FL 34601-4012			•	
				3. Date Incorporated or Qualified 08/13/1985	3a. Date of Last Report 05/01/1996	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-2640204 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			Fee Required	
City & Stat	i 0	Cily & State		6. Election Campaign Financing	\$5.00 May Be	
23	Country	7ip	Country	Trust Fund Contribution	Added to Fees	
Zip	Country		30	This corporation has hability for Florida Statutes	Intangible tax under s. 199.032,	
24	25 9. Name and Address of Cur	29 rent Registered Agent	[30]	10. Name and Address of New R		
	g, manie and more or ser		81 Name			
NOVE	RSON, DENNIS B. J		<u></u>	Loraine Delaine	2	
	PANISH OAK DR		82 Street	Address (P.O. Box Number is Not Accepta	ble)	
	3 HILL FL 34606		83	1 C OFFICE		
STARK	S HILL FL 34900					
			84 City R	Brooksville	FL 85 Zip Code 34/001	
11. Pursuant	to the provisions of Sections 617.0	0502 and 617.1508. Florida Statu	the the shows semand	perpendian submits this statement for the	purpose of changing its registered	
office or I	registered agent, or both, in the St	ate of Florida. Such change was	authorized by the corp	poration's board of directors. I hereby acce	pt the appointment as registered	
	/ ///	nigations of, Section 617.0505, F	ionua statules.			
SIGNATURE	Plant State of Profiler name of the Porter	agent and title if applicable (NC	Off Registered Agent signature	required when reinstating)	DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12	
TITLE	ÐT	☐ DELETE	11 TITLE		Change Addition	
NAME	BLOUNT, JOEL		1.2 NAME			
STREET ADDRESS	27275 AUBREY AVE.		1.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKSVILLE FL		1.4 CITY-ST-ZIP			
TITLE	\$	DELETE	2 1 TITLE	S 1 Sulent	Change Addition	
NAME	BLOUNT, PAMELA V		2.2 NAME	Blount, Darlene 27178 Aubrey Av	න	
STREET ADDRESS	8080 SPANISH OAK DRIV	E	2.3 STREET ADDRESS	27178 Aubrey 11		
CITY-ST-ZIP	SPRINGHILL FL		2. 4 CITY - S1 - ZIP	Brocksville, FL 34	602	
TITLE	D	☐ DELETE	3.1 TITLE	•	Change Addition	
NAME	BLOUNT, ELMIRA		3.2 NAME			
STREET ADDRESS	17230 WISCON RD		3.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKSVILLE FL	· · · · · · · · · · · · · · · · · · ·	3.4. CITY - S1 - ZIP			
TITLE	CD	DELETE	4.1 TITLE	Delaine, Loraine 297 C Street	Change Addition	
NAME	DICKERSON, DENNIS B J	R	4. 2 NAME	DEIGHTE		
STREET ADDRESS	8080 SPANISH OAK DR			ENT C PINECT		
CITY-ST-ZIP	SPRING HILL FL		4.4 C(TY - ST - Z)P	Brooksville, FL 3460		
TITLE	D	☐ DELETE	5 1 TITLE		Change Addition	
NAME	DELAINE, ETHEL		5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	BROOKSVILLE FL		5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			E.4 CITY - ST - ZIP			

I do 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 eath; 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 atlachment with an address.