

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 23 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # **N14375** (2)

1. Corporation Name

**INTER-CITY PRAYER BAND OUTREACH MINISTRIES, INC.**

Principal Place of Business

Mailing Address

**C/O ADA J. REED  
780 WEST 7TH STREET  
RIVIERA BEACH FL 33404-7430**

**C/O ADA J. REED  
1406 FLAGLER BLVD.  
LAKE PARK FL 33403-2155  
US**

3. Date Incorporated or Qualified

**04/15/1986**

4. FEI Number

**59-2745294**

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**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

28 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REED, ADA J.  
780 WEST 7TH STREET  
RIVIERA BEACH FL 33404**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE

NAME **REED, ADA J.**  
STREET ADDRESS **1406 FLAGLER BLVD.**  
CITY-ST-ZIP **LAKE PARK FL**

TITLE **VD** ☐ DELETE

NAME **DICERKSON, JAMES P**  
STREET ADDRESS **460 W 37TH STREET**  
CITY-ST-ZIP **RIVIERA BEACH FL**

TITLE **DS** ☐ DELETE

NAME **STRICKLAND, REGINA F**  
STREET ADDRESS **1300 W 3RD STREET**  
CITY-ST-ZIP **RIVIERA BEACH FL**

TITLE **TD** ☐ DELETE

NAME **GRAHAM, VIVIAN E**  
STREET ADDRESS **760 W 7TH STREET**  
CITY-ST-ZIP **RIVIERA BEACH FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

**VD**

**LAWSON, SANDRA L.**

**3901 36TH STREET, APT. 203-C**

**WEST PALM BEACH, FL**

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.

SIGNATURE

*[Signature]*

**4/18/98 (561) 843-8520**

CR2E037 (10/97)