## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

**DOCUMENT #**1. Corporation Name

(2)

**FILED** Mar 02 1998 8:00am Secretary of State

CARMI C.	EL ASSEMBLY OF GOD C	HURCH OF BONIFAY,	FL, IN								
Principal Plac	ce of Business	Mailing Address	Mailing Address				I IDDIIJOI OBI Pioto dicor terri edori	Diği Biğil İli	YAN BIABIY BIBIN BI		
RT. 4 BOX 401 BONIFAY FL 32425		RT. 4 BOX 401 BONFAY FL 32425			3. Date Incorporated or Qualified  09/19/1986  4. FEI Number						
						<b>*</b> . rei	59-1946587			pplied For ot Applicable	
21	Place of Business	2s. Mailing Address 26	26			5. Ce	rtificate of Status Desired		\$8.75	Additional equired	
Suite, Apt.		Suite, Apt. #, etc.	27				ection Campaign Financing est Fund Contribution		\$5.00 Added to	May Be	
City & Stat		City & State	28				7. Is this nonprofit corporation a homeowners association?  Yes   No				
<b>Z</b> ip <b>24</b>	Country 25	Zip 29	30 Cou	Country 30			s corporation owes or has possonal Property Tax due June	e 30. 🛚 🖺	☐ Yes [	tangible No	
Name and Address of Current Registered Agent     81					Name	10. Na	me and Address of New Ro	egistered A	Agent		
WOODHAM, CECIL PAUL RT. 4 BOX 260 BONIFAY FL 32425				82 83 84	City		Box Number is Not Accepta	FL	.	Code	
office or r agent. I a SIGNATURE	to the provisions of Sections 617.05 registered agent, or both, in the Statum familiar with, and accept the obli-								de changing it in contract as	s registered registered	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registere  12. OFFICERS AND DIRECTORS 13.					nt signature	required when reinsi	itating) ITIONS/CHANGES TO OFFIC	DATE CEDS AND	PIDECTOE	20 IN 10	
TITLE	DC DELETE		1.1 10	n.e		DC	THORSOCIANGES TO OLL	*****	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	WOODHAM, CECIL PAUL RT. 4 BOX 280 HWY 2 BONIFAY FL	_	1.2 NA 1.3 ST	1.2 NAME L.3 1.3 STREET ADDRESS R		LARRY F	HAWKINS Box 477 Hwy.2 Y. FL	_		hand the street	
TITLE	D	☐ DELETE		TITLE D			.,		Change	☐ Addition	
NAME	LARRY HAWKINS			22 NAME C			ECIL PAUL WOODHAM				
STREET ADDRESS CITY-ST-ZIP	RT. 3, BOX 477 HWY 2 BONIFAY FL		2.3 \$11				t. 4 BOK 260 HWY. 2 ONIFAY, FL				
TITLE	D	☐ DELETE	3.1 TIT		4-4	-			☐ Change ☐ Addition		
NAME	LOCKE, W.J.		3.2 NA	ME						_	
STREET ADDRESS	RT. 3 BOX 123 N/A		3.3 \$1	REET /	ADDRESS	I					
CITY-ST-ZIP	BONIFAY FL		34 CI	TY-S'	T - 71P	I					

CITY-ST-ZIP 14. Thereby 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.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

**SIGNATURE:** 

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

CORBIN, OTIS. JR.

**BONIFAY FL** 

**BONIFAY FL** 

RT. 3 BOX 92-A N/A

PAUL, OLLEN ODELL

RT. 3 BOX 125 N/A

Larry C. Hawkins

Change

Addition

Addition

Addition