

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 16 AM 10:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N18784 (1)

1. Corporation Name

MISSIONARY EBENEZER ASSEMBLY OF GOD, INC.

Principal Place of Business

Mailing Address

WINFER STREET
P.O. BOX 1086
ZELLWOOD FL 32790

WINFER STREET
P.O. BOX 1086
ZELLWOOD FL 32790

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1987

3a. Date of Last Report

02/17/1994

4. FEI Number

59-2974525

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

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

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GONZALEZ, GERARDO
1261 S. HIGHLAND STREET
MOUNT DORA FL 32757

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 607.0502 and 607.1508, 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 607.0505, 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 D
NAME GONZALEZ, GERARDO
STREET ADDRESS 1261 S. HIGHLAND STREET
CITY-ST-ZIP MOUNT DORA FL

1.1 TITLE D
1.2 NAME GONZALEZ, GERARDO
1.3 STREET ADDRESS 1261 S. HIGHLAND ST.
1.4 CITY-ST-ZIP MOUNT DORA FL 32757
☒ Change ☐ Addition

TITLE D
NAME CAMPOS, JESSE
STREET ADDRESS 6906 DUDLEY AVE
CITY-ST-ZIP TANGERINE FL

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

TITLE D
NAME GARCIA, ESTHER
STREET ADDRESS LAUGHLIN RD #3
CITY-ST-ZIP ZELLWOOD FL

3.1 TITLE D
3.2 NAME GARCIA, ESTHER
3.3 STREET ADDRESS 56143 LAKE AVE
3.4 CITY-ST-ZIP TANGERINE FL 32777
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 110.07(3)(b), 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:

Gerardo Gonzalez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-95

Date

Signature (Printed)