SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).								FILED		
NONPROFIT CORPORATION				FLORIDA DEPARTMENT OF STATE  Bandra B. Mortham				Aug 12 1998 8:00am		
	ANNUAL REPORT  1998			Secretary of State DIVISION OF CORPORATIONS				Secretary of State		
F	חרוו		# NI10060					Secretary	or state	
i	DOCUMENT # N18863 (3)									
	FIRST ASSEMBLY OF GOD OF RUSKIN, INC.									
P	Principal Place of Business Mailing Address							1 166(115) 001 1400 16(3) 16(1) 01(10) 10(1 	BIBIN NÇINI DIQIR QIBIN BIBIN QIDIN 1986	
	O. BOX 458 USKIN FL 33			P.O. BOX 458 Ruskin FL 33570				Date Incorporated or Qualified     01/22/1987		
ļ 								4. FEI Number 59-2749138	Applied For Not Applicable	
2. 21	Principal P	Place of Busin	1058	2a. Malling Address 26	<b>¬</b>			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22	Sulte, Apt. #, etc.			Suite, Apt. #, etc.				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
23	City & Stat	te		City & State				7. Is this nonprofit corporation a homeowners association?  Yes 1 No		
24	Zip	Country   Zip			Gountry 30			This corporation owes or has paid the ourrent year Intengible     Personal Property Tax due June 30.    Yes    No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name									stered Agent	
JONES, BOBBY M 2326 11TH AVENUE SE										
RUSKIN FL \$3570								:		
84 City FL 85 Zip Code									FL	
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								d when reinstating)	DATE	
12		PD	OFFICERS AND	<del></del>	13.			ADDITIONS/CHANGES TO OFFICE		
NA		JONES, B	OBBY M	DELETE	1.2 NAME				: Change Addition	
\$TF	REET ADORESS	2326 11TH	1 AVENUE SE		1.3 STRE	ETADDRESS	1		<u>.</u>	
ÇIT	Y-ST-ZIP	<u>Ruskin</u> F	L 33570		1.4 CITY-		ļ			
I NA	-	\$D   <b>C</b> OUNCIL, BUFORD (BUTCH)		L DELETE	2.1 TITLE 2.2 NAME		1		Change Addition	
	EET ADDRESS 2703 24TH STREET SE				2.3 STREET ADDRESS		1		I.	
СП	Y-ST-ZIP	ST-ZIP RUSKIN FL 33570			2.4 CITY-ST-ZIP		ļ			
TIT		120		DELETE			Dea		Change X Addition	
NA!	REET ADDRESS <b>\$369 RUTH MORI</b>			OAD		3.2 NAME RO		ert Wade 14th St. SE	:	
ÇIT	Y-ST-ZIP WIMAUMA FL 33589		3.4 CITY-ST				kin, Fl. 33570			
TIT		D	01 mm; m;	DELETE	4.1 TITLE	ساب	≯Tre	asurer/Deacon	Change Addition	
NA		ALMAND, P.O. BOX			4.2 NAME	ET ADDRESS	Shi	rley Almand	•	
		RUSKIN FI			4.4 CITY-			1st St. NW kin, Fl. 33570	ĺ	
TIT	LE	D		DELETE	5.1 TITLE	5.1 TITLE D		y Varn (Deacon)	Change 🙀 Addition	
NA		HEATH, R			5.2 NAME		210	6 8th St SW		
		RUSKIN FI	VENUE SE 33570		5.4 CITY-	ET ADDRESS	Rusi	kin, Fl. 33570		
TITI		D		X DELETE	6.1 TITLE		Dea	CON	Change X Addition	
			ADE, JOHN			6.2 NAME W1.		liam Butler		
	REETADDRESS 1004 CALLE ROSA PL. Y-ST-ZIP SUN CITY CENTER FL 33573				1	ET ADDRESS		Box 382 N/A		
64 CITY-ST-ZIP SUN CITY CENTER FL 33573  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										
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 cath; 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 attaching that my name address.										
SIGNATURE: BENEFICIAL PASTOR DIRECTOR 7/30/98 8/3-645-3237  BIGNATURE AND TYPE OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR  BIGNATURE AND TYPE OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR  BIGNATURE AND TYPE OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR  BIGNATURE AND TYPE OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR										
	SIGNATURE AND FERDING WARRE OF SIGNING OFFICER OR DIRECTOR PAGE PROPERTY DATE PROPERTY DESCRIPTION IN THE PROPERTY									