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May 05 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **N20899** (3)

1. Corporation Name

HOSANNA ASSEMBLY OF GOD, INC.

Principal Place of Business

**18924 COUNTY LINE RD
SPRING HILL FL 34610**

Mailing Address

**18924 COUNTY LINE RD
SPRING HILL FL 34610-6152**



3. Date Incorporated or Qualified
04/30/1987

3a. Date of Last Report
02/01/1996

4. FEI Number
59-2803414

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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 **30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CHERRY, GLEN P
18920 COUNTY LINE ROAD
SPRING HILL FL 34610**

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 *Glen P. Cherry*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/27/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DT** ☒ DELETE
NAME **JOHNSON, JAMES**
STREET ADDRESS **18910 GRACIE LEE STREET**
CITY - ST - ZIP **SPRING HILL FL**

TITLE **D** ☒ DELETE
NAME **PANCAST, RUSS**
STREET ADDRESS **29184 WILDLIFE LANE**
CITY - ST - ZIP **BROOKSVILLE FL**

TITLE **DS** ☐ DELETE
NAME **BOLTON, LARRY**
STREET ADDRESS **3443 AUGUSTINE RD**
CITY - ST - ZIP **SPRING HILL FL**

TITLE **C** ☐ DELETE
NAME **CHERRY, GLEN**
STREET ADDRESS **18920 COUNTY LINE RD**
CITY - ST - ZIP **SPRING HILL FL**

TITLE **D** ☒ DELETE
NAME **FOWLE, SHIRLEY**
STREET ADDRESS **16288 WILSON BLVD**
CITY - ST - ZIP **MASARYKTOWN FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **D. Lane Bragko**
1.3 STREET ADDRESS **11093 Ancient Trail**
1.4 CITY - ST - ZIP **Brookville, FL 34601**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **Jeff Perry**
2.3 STREET ADDRESS **13255 Sun Road**
2.4 CITY - ST - ZIP **Brookville, FL 34613**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

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

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

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

14. 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 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.

CR2E037 (9/96)