

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Aug 25 1997 8:00am
Secretary of State

DOCUMENT # N21243 (3)

1. Corporation Name

LOVE GOSPEL ASSEMBLY OF GOD, INC.

Principal Place of Business

Mailing Address

3279 SHERWOOD ROAD
PORT CHARLOTTE FL 33980

P.O. BOX 2583
PORT CHARLOTTE FL 33949

24038 Harborview Rd.
Port Charlotte, FL 33980

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/22/1987

3a. Date of Last Report
08/12/1996

2. Principal Place of Business

2a. Mailing Address

21 24038 Harborview Rd

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Port Charlotte, FL 33980

28

Zip

Country

Zip

Country

24 33980

25 Charlotte

29

30

4. FEI Number

65-0223033

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GARCIA, TONY REV
711 LEELAND HIGHTS. BLVD. WEST
LEHIGH ACRES FL 33936

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

8/16/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GARCIA, TONY REV
STREET ADDRESS 711 LEELAND HIGHTS. BLVD. WEST
CITY-ST-ZIP LEHIGH ACRES FL 33936

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Gabriel, Quessada Mr
21508 Edgewater Drive
Port Charlotte, FL 33952

TITLE TD
NAME OSORIO, NIEVES MRS
STREET ADDRESS 22395 DONALDA AVENUE
CITY-ST-ZIP PT CHARLOTTE FL 33954

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Angelo Cordero Mr
21203 Meehan Ave
Port Charlotte, FL 33952

TITLE SD
NAME DUKOR, BARBARA P. Ms.
STREET ADDRESS 2589 ROCK CREEK DR
CITY-ST-ZIP PT CHARLOTTE FL 33948

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

TITLE T
NAME MALDONADO, DAVID MR
STREET ADDRESS 23018 UTICA AVENUE
CITY-ST-ZIP PT. CHARLOTTE FL 33980

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

TITLE T
NAME DE JESUS-ZAMOT, SONIA MISS
STREET ADDRESS 181 N.E. DOWLING AVE.
CITY-ST-ZIP PT. CHARLOTTE FL 33952

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
SD
DeJesus-ZAMOT, Sonia Miss
181 Dowling Ave
Port Charlotte, FL 33952

TITLE T
NAME FERNANDEZ, ELIGIO - Mr.
STREET ADDRESS 111 ORANGE STREET
CITY-ST-ZIP PT. CHARLOTTE FL 33952

6.1 TITLE
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.

SIGNATURE

SIGNATURE REQUIRED

CP2E037 (4/97)