FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 27 1998 8:00am Secretary of State

DOCUMENT # N24850 (2)					
UPPER ROOM OF JESUS CHRIST WRITTEN IN HEAVEN, IN					
C.					
Principal Plac	e of Business	Mailing Address			I DIBIR BIDII DIDII DIBII IODI
2920 NORTHWEST 12TH STREET 4841 NORTHWEST 17 COL			IRT	3. Date Incorporated or Qualified	
FT. LAUDERDALE FL 33311 LAUDERHILL FL 33313			,,,,	02/15/1988	
İ		US		4. FEI Number	Applied For
			<u></u>	65-0039102	Not Applicable
2. Principal P	Place of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	Suite, Apt. #, etc. Suite, Apt. #, etc.			Election Campaign Financing	\$5.00 May Be
City & Stat		27 City & State		Trust Fund Contribution	Added to Fees
23		28		7. Is this nonprofit corporation a homeowners	s association?
Zip			Country		
	25	29	30	, , , , , , , , , , , , , , , , , , , ,	Yes 🔀 No
	9. Name and Address of Curren	l Registered Agent	81 Name	10. Name and Address of New Registered	Agent
ALLEY CONTROLLS					
Mark, Freemon A. 1577 N. Dixie Highway			82 Street Add	ress (P.O. Box Number is Not Acceptable)	1
POMPANO BEACH FL 33313			83	 	
'''''' '''	to benon 12 doors		84 City		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.					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered age	ru and title if explicable (NO)	E: Registered Agent signature requ	red when reinstaling) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME .	POOLE, ALGIE B., JR.		1.2 NAME		
STREET ADDRESS	4841 NW 17TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL	Doriette	1.4 CITY-ST-ZIP		D Obarra D Addition
TITLE	SD DIES NENDIETTA	☐ DELETE	2.1 TITLE	:	☐ Change ☐ Addition
NAME STREET ADDRESS	RILES, HENRIETTA 920 NW 34TH WAY		2.2 NAME 2.3 STREET ADDRESS	•	
CITY-ST-ZIP	FT. LAUDERDALE FL		2.3 STREET ADDRESS		1
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	POOLE, CAROLYN E.		3.2 NAME		1
STREET ADDRESS	4841 NW 17TH COURT		3.3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		ſ
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	certify that the information supplied wi	th this filling does not qualify for	6.4 CITY-ST-ZIP	Section 119.07(3)(i). Florida Statutes, I further ce	rtify that the information

4. 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.

SIGNATURE CO 2 2 R

Do Mary Horas F D

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