

FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 01 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N25229 (8)

1. Corporation Name
WORLDWIDE EVANGELISTIC GOSPEL ASSOCIATION OF ESC AMBIA COUNTY, FLORIDA, INC.

Principal Place of Business 3436 W LUKE PENSACOLA FL 32505 US	Mailing Address P.O. BOX 283 CANTONMENT FL 32533 US
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3. Date Incorporated or Qualified
03/04/1988

4. FEI Number
35-1580091

Applied For	<input checked="" type="checkbox"/>
Not Applicable	<input type="checkbox"/>

2. Principal Place of Business

21 2610 W. Michigan Ave	2a. Mailing Address P.O. Box 283
Suite, Apt. #, etc.	Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

22

23 Pensacola FL	27 Cantonment FL
City & State	City & State

7. Is this nonprofit corporation a homeowners association?
 Yes No

24 32505	25 FL	29 32533	30 FL
Zip	Country	Zip	Country

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

**SMILEY, ANTHONY D.
211 CONCORDIA BLVD.
PENSACOLA FL 32505**

10. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMILEY, EDDIE L.	1.2 NAME	
STREET ADDRESS	2997 HIGHWAY 95, A NORTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	CANTONMENT FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMILEY, MARTHA	2.2 NAME	
STREET ADDRESS	2997 HIGHWAY 95, A NORTH	2.3 STREET ADDRESS	
CITY-ST-ZIP	CANTONMENT FL	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMILEY, KEVIN C.	3.2 NAME	
STREET ADDRESS	121 VANDERBITY	3.3 STREET ADDRESS	
CITY-ST-ZIP	PENSACOLA FL	3.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMILEY, WAYNE	4.2 NAME	
STREET ADDRESS	228 SEVILLE CIRCLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MARY ESTHER FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: _____ DATE: **3/26/98**

CR2E037 (10/97)