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

DOCUMENT #

N26539

(9)

TENTH STREET CHURCH OF GOD OF LAKELAND, INC.

FERGUSON, ANNIE L 608 W 4TH ST

STREET ADDRESS

1511111	- Chice Chollon Or Gol	- CONCERNO NO				
Principal Place of Business		Mailing Address				
801 WEST TENTH STREET 801 WEST TENTH LAKELAND FL 33805-3601 LAKELAND FL 3380					3. Date Incorporated or Qualified 05/23/1988	
					4. FEI Number 59-2907750	Applied For Not Applicable
2. Principal Place of Business 2a. Mailing Address 21					5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	W, etc.	Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State	•	City & State		7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No		
Zip 24	Country 25	Zip 29	Country 30	1	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
	g. Name and Address of Curren	t Registered Agent			Name and Address of New Registers	rd Agent
			81	Name		
SWEAT, WILLIAM A JR. 2018 SOUTH FLORIDA AVENUE LAKELAND FL 33803			82	82 Street Address (P.O. Box Number is Not Acceptable)		
			83	l		
			84	City		85 Zip Code
SIGNATURE .	Signature, typed or printed name of registered age	ent and title if applicable. (NO	TE: Registered Ag		d corporation submits this statement for the purpose poration's board of directors. I hereby accept the a required when reinstating) DATE	E
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	VO	☐ DELETE	1.1 TITLE		CD	Change Addition
NAME	WILSON, DEWEY J	_	1.2 NAME		Wilson, Dewey Jr.	
STREET ADDRESS	1328 ROBERT KING HIGH DE	₹	1.3 STREE	T ADDRESS	1328 Robert King High Dr	
CITY-ST-ZIP	LAKELAND FL		1.4 CITY-	ST-ZIP	Lakeland, Fl	Tobarra Madrica
TITLE	D & DELETE		2.1 TITLE		D	☐ Change
NAME	SMITH, RICHARD A SR		2.2 NAME		Frances Hicks	
STREET ADDRESS	1625 COLUMBIA ST			T ADDRESS	612 W. Park St	
CITY-ST-ZIP	LAKELAND FL			ST-ZIP	Lakeland, Fl	Change Addition
TITLE	_		3.1 TITLE			☐ Charige ☐ Adoleon
NAME	MCCLOUD ARTHUR, L		3.2 NAME			
STREET ADDRESS	4824 DOVE LANE			T ADDRESS	'	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		Change Addition
TITLE			4.1 TITLE			
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS	1	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		Change Addition
TITLE		☐ DELETE	5.1 TITLE			Cal custiles Cal sequine
NAME	BONAPARTE, QUEEN		5.2 NAME			
STREET ADDRESS	525 MORGAN AVE			T ADDRESS		
CITY - ST - ZVP	LAKELAND FL	DELETE	5.4 CITY-	ST-ZIP		Change Addition

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: (Puris L. Perditaria) ANDEN FERGUSON 4-3-98 941-294-0785

CR2E037 (10/97)

FILED

May 05 1998 8:00am

Secretary of State