FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # N28429

(1)

FULL GOSPEL WORSHIP CENTER, INC.

FULL GUOFEL IN	Ononir Centen,								
Principal Place of Business		Mailing Address	-			* (4 mille)	.a.c. grytt (#186) (#()		1841
% LONNIE W. PENTON		% LONNIE W. PENTON							
100 SEMINOLE TRL. 100 SEMINOLE TRL.									
PENSACOLA FL 32506						3. Date incorporated or Qualified 09/20/1988	3a. Date of Last Report 04/17/1995		
2. Principal Place of Busine	SS .	2a. Mailing Address	09/20/1988 04/17/1995 4. FEI Number Applied For Not Applicable 59-2919496 88.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be						
	h st.	26 100 SeMi	NOL	e	TRL.	59-2919496			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	Fee Required		
City & State	<i>(</i> 1)	City & State	n	Li.	,				
PENSACOLA,	TL. Country	28 PENSACOL		nlev	-				
1.32.514	Country 25 RSCAMD; A	29 32 506	<u> </u>		CAMBIA	Florida Statutes			
	and Address of Current						egistered Age	nt	
				B1 N	Vame				
PENTON, LONNIE W.				82 5	Street Aridres	iss (P.O. Box Number is Not Acceptable)			
190 SEMINOLE TRL.				-					
PENSACOLA FL 32506			ļ	53				_	
			ļ	84 City			E1 E	B5 Zip Code	
44.5	no of Cartha and and	nd 617 1500 Fixed - 00-1	ie tho at-	WO 555	ned comercial	ion submits this statement for the pure	oose of changi	ng its re	gistered office
familiar with, and accep SIGNATURE	ot the obligations of, Section	n 617.0503, Florida Statutes.							
Signature, typed :	or printed name of registered agent at OFFICERS AND				ignature recursed vi			REC10	FIS IN 12
IZ. ITLE D	OFFICENS AND	DELETÉ							
AME PUGH, (DENNIS	_			ļ				
	AWK TRAIL				DORESS				
PENSAC			140	ITY-ST-	ZIP				
ITLE D		DELETE	211	ITLE		· 		Change	
	GTON, GLENN		22N	IAME					
	JSH STREET								
PENSAC	JULA FL				- ZIP			Change	☐ Addition
D D	Ci Chianna	DELETE			_			онанув	☐ Munition
44451	GLENNON ILLIAN HWY.				JOBECC				
DENCA	ILLIAN HWY. COLA FL								
CITY-ST-ZIP PENSAL	VER I E	DELETE			411			Change	Addition
	ER, CLYDE								
	ORTH S STREET				DDRESS				
CITY-ST-ZIP PENSC									
TITLE DID		DELETE		TITLE				Change	Add-tion
NAME JAMAN	eminore +	DANIE W.	5.2 1	NAME					
STREET ADDRESS 100 S	eminore't	R.L.	535	STREET AL	DDRESS				
CITY-ST-ZIP PENS.	A COLA, FL.	32500		CITY-ST-	-ZIP			Change	Addition
linfe	•	DELETE		TIFLE	.	00000170	SOOO	Change	Addition
NAME				NAME ^		-03/28/9601	954no	ر. 1	
STREET ADDRESS				STREET A		***70.00	UU- TUU	1	
CITY-ST-ZIP	the information and it is	ith this filing is valentaile for	niched and	CITY-ST- 1 does	not qualify fo	or the execution stated in Section 119	.07(3)(k). Florid	la Statut	tes. I further
certify that the informa	ition indicated on this annu	al report or supplemental and	nual report	is true	and accurati	e and that my signature shall have the report as required by Chapter 617, F	same legal et	fect as i	f made under

PONTE U LONNIE W. PENTON 3-14-96-904-456-2541