## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # N30247**

1. Corporation Name

GOD'S CALLING GOSPEL HOLINESS CHURCH INC.

Principal	Place of Bu
C/O W.J. 2261 NW	JONES 58 STREET
MIAMI FI	33142

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

C/O W.J. JONES 2261 NW 58 STREET MIAMI FL 33142

2a. Mailing Address

Suite, Apt. #, etc.

## **FILED** Mar 05, 1999 8:00 am § Secretary of State

03-05-1999 90036 021 \*\*\*\*70.00

Applied For

3. Date Incorporated or Qualifed.

01/19/1989 4. FEI Number

Suite, Apt.	#, 8tC.	27				65-0102704	Not	Applicable		
City 9 State	City & State City & State						\$8.75 Additional			
23	5	28	Jity & State			5. Certificate of Status Desired		Fee Required		
Zip	Country	Zip	Cour	ntry		6. Election Campaign Financing	\$5. <b>00</b> N	May Be		
24	25	29	30			Trust Fund Contribution	Added to	Fees		
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
				81	Name					
JONES, WILLIE JAMES 2261 NW 58TH STREET				82	Street Addre	Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33142				83						
	337.2		ł	84 City 85 Zip Code						
					•	FL				
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statut	es, the at	by f	-named corpo	oration submits this statement for the purpose on's board of directors. I hereby accept the appo	r changing its r sintment as rec	registered istered		
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.										
_							-	1		
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registered	Agent	signature required					
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A				
TITLE	PTDC	☐ DELETE	1.1 TIT	LE			Change	☐ Addition		
NAME	JONES, WILLIE JAMES		1.2 NA	ME						
STREET ADDRESS	2261 NW 58 STREET	· ·			ADDRESS		•	· · · · · · · · · · · · · · · · · · ·		
CITY-ST-ZIP				Y-ST	-ZIP	·				
TITLE	VD	☐ DELETE	2.1 TIT	LE			☐ Change	☐ Addition		
NAME	JONES, HELEN W.		2.2 NA	ΜЕ		, · ·		1		
STREET ADDRESS	ACCULANCE OF OTHER		2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33142		2.4 CI	TY-S1	r-ZIP					
TITLE	MD	☐ DELETE	3 1 TIT				Change	Addition		
NAME	BOWIE, RUTHIE MAE	- HAID								
STREET ADDRESS	1235 NW 84 TERRACE		3.3 ST	REET ADDRESS						
	MIAMI FL		3.4. Cf				•			
CITY-ST-ZIP TITLE	D	☐ DELETE	4,1 111				. Change	Addition		
NAME	COLE, AUDREY		4.2 N	ME			,			
STREET ADDRESS	14961 BUCHANAN STREET		4.3 ST	REET	ADDRESS					
CITY-ST-ZIP	MIAMI FL		4.4 CT	ry-st	-ZIP					
TITLE	SD	☐ DELETE	5.1 TIT				· Change	☐ Addition		
NAME	FRANCOIS, BRENDA S		5.2 NA	ME	1	• • •	•			
STREET ADDRESS			5.3 ST	REET	ADORESS					
CITY-ST-ZIP	MIAMI FL 33142		5.4 CF	TY-ST	-ZIP			,		
TITLE	S S	☐ DELETE	6.1 717	ne -			☐ Change	☐ Addition		
NAME	JONES, TINEKA C		6.2 NA	ME						
STREET ADDRESS			6.3 ST	REET	ADDRESS	•				
	MIAMI FL 33142		6.4 CF	TY-ST	-ZiP		•			
CITY-ST-ZIP	INITAMI EL 33 192				1 1 11 5	- the 440 07(2)(i) Finding Chabitage I forther or	edific that the in	formation		

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR