


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 18 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N33533 (3)					
1. Corporation Name UNITED PENTECOSTAL CHURCH, INC. OF ST. LUCIE COUNTY					



Principal Place of Business 655 NW SALEM TERR. #655 PT. ST. LUCIE FL 34983 US		Mailing Address 733 SW HOGAN ST. PT. ST. LUCIE FL 34983 US		3. Date Incorporated or Qualified 08/03/1989	
2. Principal Place of Business 21 650 NW AIROSO BLVD Suite, Apt #, etc.		2a. Mailing Address 26 5805 PAPAYA DR Suite, Apt #, etc.		4. FEI Number 59-2469307	
22 City & State 23 PORT ST LUCIE FL Zip 24 34963		27 City & State 28 FT PIERCE FL Zip 29 34982		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 ST LUCIE		30 ST LUCIE		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent KOTTHAUS, FREDERICK 733 SW HOGAN ST. PT. ST. LUCIE FL 34983		10. Name and Address of New Registered Agent 81 Name FREDERICK KOTTHAUS 82 Street Address (P.O. Box Number is Not Acceptable) 5805 PAPAYA DR. 83 84 FT PIERCE FL 85 Zip Code 34982			

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 *[Signature]* DATE 2/11/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0 <input checked="" type="checkbox"/> DELETE	1.1 TITLE	0 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TURNER, DON	1.2 NAME	STEVE BYRD
STREET ADDRESS	4004 GREEN WOOD DR	1.3 STREET ADDRESS	766 N.W. RAINBOW ST
CITY-ST-ZIP	FT PIERCE FL	1.4 CITY-ST-ZIP	PORT ST LUCIE, FL 34983
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DONN ORCUTT	2.2 NAME	PHILIP MONK
STREET ADDRESS	357 S E VERADA AVENUE	2.3 STREET ADDRESS	861 N.E. FLORESTA DR
CITY-ST-ZIP	PORT ST LUCIE FL	2.4 CITY-ST-ZIP	PORT ST LUCIE 34983
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOTTHAUS, FREDERICK	3.2 NAME	
STREET ADDRESS	733 SW HOGAN ST.	3.3 STREET ADDRESS	5805 PAPAYA DR
CITY-ST-ZIP	PT. ST. LUCIE FL	3.4 CITY-ST-ZIP	FT. PIERCE, FL 34982
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JAMES, BYRON	4.2 NAME	CHRIS MEEHAN
STREET ADDRESS	486 SE CROSS POINT DR	4.3 STREET ADDRESS	2001 S 30TH ST
CITY-ST-ZIP	PORT ST LUCIE FL	4.4 CITY-ST-ZIP	FT PIERCE FL 34947
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOOD, DON	5.2 NAME	MARK MCCLUNG
STREET ADDRESS	2417 SW ANGUS AVE	5.3 STREET ADDRESS	3550 S US1 # 70
CITY-ST-ZIP	PORT ST LUCIE FL	5.4 CITY-ST-ZIP	FT PIERCE FL 34982
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	S/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	SUSAN MEEHAN
STREET ADDRESS		6.3 STREET ADDRESS	2001 S 30TH ST
CITY-ST-ZIP		6.4 CITY-ST-ZIP	FT PIERCE FL 34982

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 in an attachment with an address.

SIGNATURE: *[Signature]* DATE 2/11/98 561-460-8055

CR2E037 (10/97)

## **UNITED PENTECOSTAL CHURCH**

5805 Papaya Dr  
Ft. Pierce, Fl 34982

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Phone 561-460-8055

Fax 561-460-8056

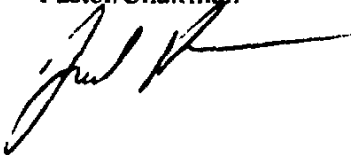
February 11, 1998

To Whom It may concern:

In a duly called meeting of the Board of Directors, dated Feb 11th 1998 , the follow resolution was carried .. Be it resolved that Rev Fred Kotthaus Chairman/President of the United Pentecostal Church Inc of St. Lucie Co. be granted the authority by this Board of Directors to lawfully take possession of the facility located at 650 NW Airoso Blvd., formerly 655 NW Salem Terr Port St. Lucie Fl...

Signed

Rev Fred Kotthaus  
Pastor/Chairman



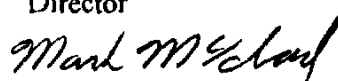
Susan Meehan  
Secretary/Treasurer



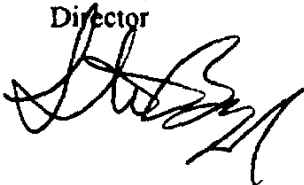
Chris Meehan  
Director



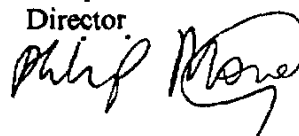
Mark McCloud  
Director



Steve Byrd  
Director



Philip Mone'  
Director



**"And Ye shall know the Truth, and the Truth shall make you free..."**