SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998			DIVISION OF CORPORATIONS			Secretary of State		
DOCU 1. Corporation	MENT # N33	774	(3)			Scoretary or State		
NEW PROSPECT MISSIONARY BAPTIST CHURCH OF OSLO, INC.								
Principal Plac	e of Business	Mailing	Mailing Address					
925 S.W. 9TH VERO BEACH			P.O. BOX 372 VERO BEACH FL 32961			3. Date Incorporated or Qualified  08/16/1989  4. FEI Number  Applied For		
						4. FEI Number Applied For Not Applied ble		
2. Principal F	Place of Business	2a. Mail 26	2a. Mailing Address 26			5. Certificate of Status Desired \$8.75 Additional Fee Required		
Suite, Apt.	#, etc.	Sulti 27	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & Sta	te	<u> </u>	City & State			7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip		Country		This corporation owes or has paid the current year intangible		
24	9. Name and Address of	29   Current Registered		30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
				81	Name -			
MCKINNE'								
	1155 8TH COURT, S.W.					2 Street Address (P.O. Box Number is Not Acceptable), スュ36 (引生 インモニ・W・		
	ICH FL 32962			63				
				84	City \/	( 85   Zip Code		
	VCro (Jeach   FL   32% -							
11. Pursuant to	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 fanfillar with, and accept the obligations of section 617.0503, Florida Statutes.							
agent. I a	m familiar with, and accept the	obligations of section	on 617.0503, Florida ►	a Statutes.	·	alinteo		
SIGNATURE	Stoneture, typed or printed name of regit	stered agent and title if applice	able. (NOTE	: Registered Ag	ent signature	re required when reinstating) DATE		
12.		ERS AND DIBECTO		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P		DELETE	1.1 TITLE		Change Addition		
NAME	Brown, Willie			1.2 NAME				
STREET ADDRESS	310 43RD AVENUE			1.3 STREET	ADDRESS			
CITY-ST-ZIP	VERO BEACH FL 32968	······································		1.4 CITY-ST	-ZIP			
TITLE	S S S S S S S S S S S S S S S S S S S		DELETE	2.1 TITLE				
NAME OTDEET ADDRESS	DARRISAW, MARY ELLA 310 43RD AVENUE			2.2 NAME 2.3 STREET	4000500	-09/30/9801077007		
CITY-ST-ZIP	VERO BEACH FL 32968			2.4 CITY-ST		*** <u>6</u> 1.25		
TITLE	TD		DELETE	3.1 TITLE		FINANCE CHAIRPERSON DANGETON DANGETON		
NAME	MCKINNEY, CARRIE PEA	RL	My present	3.2 NAME		Incerns Jones Toward T		
STREET ADDRESS	1155 8TH COURT, S.W.			3.3 STREET	ADDRESS	2236 1912 AVE SW		
CITY-ST-ZIP	VERO BEACH FL 32962			3.4 CITY-ST		VERO BEACH, FL-32962		
TITLE	D		DELETE	4.1 TITLE		TRUSTEE Chairman Change Addition		
NAME	WEBB, ALBERT			4.2 NAME	1	Thomas Celson 1223 McCray CT.		
STREET ADDRESS	2626 20TH AVENUE			4.3 STREET	ADDRESS 1	1223 MCC124 C		
CITY-ST-ZIP TITLE	VERO BEACH FL 32960		N or ere	4.4 CITY-ST 5.1 TITLE	-ZiP	FORT PIETCE, FL34950  [Kesurer Hussel   Change Maddition		
NAME	D Hammons, John		DELETE	5.1 THEE		Carolyn Mc NEal Change MAddition		
STREET ADDRESS	108 S.W. 6TH AVENUE			5.3 STREET	ADDRESS	ZII GIE COVET S.W.		
CITY-ST-ZIP	VERO BEACH FL 32962			5.4 CITY-ST	ZIP ,	VERO BEACH 7- 32962		
TITLE			DELETE	6.1 TITLE		Change Addition		
NAME			<del></del>	6.2 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS	4,2 9/2/9		
CITY-ST-ZIP				6.4 CITY-ST	ZIP	1 <b>47</b> 42 7/3 8/98		

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 confly 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(56) 562-0603

**FILED** 

Sep 30 1998 8:00am<sup>1</sup>