FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

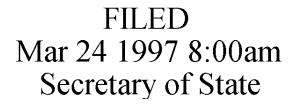
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(4)

THE CHURCH OF THE LIVING GOD THE PILLAR AND GROU ND OF THE TRUTH FOR ALL PEOPLE INCORPORATED

Principal Place of Business

Mailing Address





2100 BARKER BLVD 2100 BARKER BLVD FORT MYERS FL 33916 FORT MYERS FL 33916-4613							
US		US			3. Date incorporated or Qualified 09/14/1990	3a. Date of Last Re 03/14/19	eport 96
21 2100			KEr	Blud	4. FEI Number 65-0223901) '	plied For 1 Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	
City & State	TMYRYS, FLA.	, , , , , , , , , , , , , , , , , , ,	1245	FLA	Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	o Fees
24 3 3 9	20		Count	, ee		Yes 🗾 No	199.032,
	9. Name and Address of Current F	Registered Agent	8	Name	10. Name and Address of New Rec	istered Agent	
BOLES	OSSIE I					··	
BOLES, OSSIE L. 2100 BARKER BLVD				82 Street Address (P.O. Box Number is Not Acceptable)			
	RS FL 33916		8:	3			
			84	City		85 Zip (Code
	(2)					- FL	İ
office or re agent. Far SIGNATURE	egistered agent, or both, in the State of in familiar with, and accept the obligation Stignation by store proted name of registered agents	Florida: Such change was au pris of, Section 617,0503, Flor 2 .4 ~ 0.551.6	uthorized t rida Statute . e e.	by the corpora Bol 🕰 S	rporation submits this statement for the pration's board of directors. I hereby accept support the properties of the province	the appointment as	registered
12.	OFFICERS AND I		13.	ann organization rode	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE	1		Change	Addition
NAME	BOLES, NIMROD		1.2 NAME				
STREET ADDRESS	2100 BARKER BLVD			T ADDRESS			Į.
DITY-ST-ZIP TITLE	FT MYERS FL D	DELETE	1.4 CITY- 2.1 TITLE			Change	Addition
NAME	BOLES, OSSIE L.		2.1 HILE 2.2 NAME			L Change	Addition
STREET ADDRESS	2100 BARKER BLVD			T ADDRESS			
CITY-ST-ZIP	FT MYERS FL		2. 4 CITY				
TITLE	D	DELETE	3.1 TITLE		**	☐ Change	Addition
NAME	GAVIN, WILLIE L		3.2 NAME				
STREET ADDRESS	2100 BARKER BLVD.		3.3 STREE	T ADDRESS			ĺ
C(TY+S)+7IP THLE	FT. MYERS FL	DELETE	3.4. CITY			Change:	Adalalas
NAME		- DECETE	4.1 TITLE 4. 2 NAM			∐ Change	Addition
STREET ADDRESS				T ADDRESS			
CHY-SI-ZIP			4.4 CITY -				
THLF		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADORESS			5.3 STREE	T ADDRESS			
CITY-S1-ZiP		The eve	5.4 CITY-				
11116		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			
C(1Y+S1-Z)P	weed to that the information supplied w	ith this films does not qualify	6.4 CITY-		od in Section 110 07/3\/i) Florida Statutos	1 fth	

I do 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 challingd, or an an attrohyment with an address.

GNATURE:

GNATURE:

GNATURE:

SIGNATURE: