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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 # N92000000392 (2)

1. Corporation Name
FIRST CHURCH OF GOD OF LABELLE INCORPORATED



Principal Place of Business 80 FLORIDA STREET LABELLE FL 33935 US		Mailing Address PO BOX 370 LABELLE FL 33935		3. Date Incorporated or Qualified 11/20/1992	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-6598960	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22	City & State	27	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	Zip	28	Country	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	Country	29	Zip	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent STONE, WESLEY B. 401 FIRST AVE LABELLE FL 33935				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code

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: Rev. Wesley B. Stone DATE: 2-11-98
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T TANNER, GENE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	251 S. LEE ST	1.2 NAME	
STREET ADDRESS	LABELLE FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	T STONE, DOLLY	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	401 FIRST AVE.	2.2 NAME	
STREET ADDRESS	LABELLE FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	T HUDSON GLEN	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	910 EVANS RD	3.2 NAME	
STREET ADDRESS	LABELLE FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	T BARBER, KEITH	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1625 COUNTY ROAD 78	4.2 NAME	Trustee
STREET ADDRESS	LABELLE FL	4.3 STREET ADDRESS	ALLAN HOWARD
CITY-ST-ZIP		4.4 CITY-ST-ZIP	3634 FT. Keis Ave.
TITLE	P STONE, REV WESLEY B.	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	401 FIRST AVE	5.2 NAME	
STREET ADDRESS	LABELLE FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	T HOWARD, JUANNE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOX 2001 CR 78 WEST	6.2 NAME	
STREET ADDRESS	LABELLE FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: Juanne Howard Gene Tanner DATE: 2-11-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CF2E037 (10/97)