

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000001451 (4)

1. Corporation Name

OKEECHOBEE FIRST PENTECOSTAL HOLINESS CHURCH, IN
C.



Principal Place of Business

912 N.W. 2ND ST.
P.O. BOX 1123
OKEECHOBEE FL 34973

Mailing Address

912 N.W. 2ND ST.
P.O. BOX 1123
OKEECHOBEE FL 34973

3. Date Incorporated or Qualified
03/31/1993

3a. Date of Last Report
07/03/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
65-0377283

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOWLER, JOHN E.
7180 NE 12 LN
OKEECHOBEE FL 33474

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

John E. Dowler, Director 2/19/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE
NAME CRAWFORD, CHARLES R
STREET ADDRESS #10 ROSEBUD PARK
CITY-ST-ZIP OKEECHOBEE FL 34972

1.1 TITLE PD ☐ Change ☐ Addition
1.2 NAME MELVIN HuHo
1.3 STREET ADDRESS 1793 S.W. 22ND TERR
1.4 CITY-ST-ZIP OKEECHOBEE, FL 34972

TITLE VD ☒ DELETE
NAME SWINFORD, BRUCE W
STREET ADDRESS P.O. BOX 1663 N/A
CITY-ST-ZIP OKEECHOBEE FL 34973-1663

2.1 TITLE T ☐ Change ☐ Addition
2.2 NAME MARY HAY
2.3 STREET ADDRESS 9205 S.E. 60TH DR.
2.4 CITY-ST-ZIP OKEECHOBEE, FL 34974

TITLE STD ☒ DELETE
NAME WYATT, PAMELA J
STREET ADDRESS 7280 N.W. 87TH COURT
CITY-ST-ZIP OKEECHOBEE FL 34972

3.1 TITLE ST ☒ Change ☐ Addition
3.2 NAME LINDA D. HEATER
3.3 STREET ADDRESS 17216 N.W. 3RD LANE
3.4 CITY-ST-ZIP OKEECHOBEE, FL 34974-8551

TITLE D ☐ DELETE
NAME DOWLER, JOHN E
STREET ADDRESS 7180 N.E. 12TH LANE
CITY-ST-ZIP OKEECHOBEE FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME HEATER, DONALD
STREET ADDRESS 17216 N.W. THIRD LANE
CITY-ST-ZIP OKEECHOBEE FL 34972

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME HUTCHINSON, CARSON
STREET ADDRESS 8842 S.E. 57TH DR.
CITY-ST-ZIP OKEECHOBEE FL 34972

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda D. Heater 2/20/96 (941) 357-1028

Daytime Phone

CR2E037 (12/95)