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Feb 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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 34973-1123**



3. Date Incorporated or Qualified
03/31/1993

3a. Date of Last Report
03/11/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 **30**

4. FEI Number
65-0377283

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

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 John E. Dowler
Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-11-97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD HUTTO, MELVIN**
STREET ADDRESS **1793 SW 22ND TERR**
CITY-ST-ZIP **OKEECHOBEE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **T HAY, MARY**
STREET ADDRESS **9205 SW 60TH DR**
CITY-ST-ZIP **OKEECHOBEE FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **ST HEATER, LINDA D.**
STREET ADDRESS **17216 NW 3RD LANE**
CITY-ST-ZIP **OKEECHOBEE FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **ST HEATER, Linda D.**
3.3 STREET ADDRESS **3603 S.E. 26th Street**
3.4 CITY-ST-ZIP **OKEECHOBEE, FL 34974**

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

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **D HEATER, DONALD**
5.3 STREET ADDRESS **3603 S.E. 26 Street**
5.4 CITY-ST-ZIP **OKEECHOBEE, FL 34974**

TITLE ☐ DELETE
NAME **D 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 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: Linda D. Heater
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/97 (94)3571028

CR2E037 (9/96)