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Secretary of State

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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N93000002210

1. Corporation Name

REVEREND SAMUEL DELEVOE PARK CIVIC ASSOCIATION, INC.

487 132 - 50043 - 45

Principal Place of Business
 2540 SISTRUNK BLVD
 FT. LAUDERDALE FL 33311

Mailing Address
 1733 SW 5TH ST
 FT. LAUDERDALE FL 33312



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		05/14/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0836724	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24		29		Trust Fund Contribution <input type="checkbox"/>	
Country		Country		\$5.00 May Be Added to Fees	
25		30			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DELEVOE, LOIS J
 1733 SW 5TH ST
 FT. LAUDERDALE FL 33312

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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 _____ DATE _____
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	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELEVOE, LOIS J	1.2 NAME	
STREET ADDRESS	1733 SW 5TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRANT, MARY E REV	2.2 NAME	
STREET ADDRESS	3498 N.W. 2ND ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, WILBY B PASTOR	3.2 NAME	
STREET ADDRESS	3273 NW 22ND AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	OAKLAND PARK FL 33309	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, LAURA MAE	4.2 NAME	
STREET ADDRESS	1643 NW 14TH CT	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELEVOE, SAMUEL J (samuel)	5.2 NAME	
STREET ADDRESS	1722 SW 5TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		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, with all other like empowered.

SIGNATURE: *Samuel J Delevoe* **SIGNATURE REQUIRED** 4-29-99-1357 ⁹⁵⁴⁻⁷⁹²
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (1/98)