

FILE NOW: FILING FEE IS \$61.25

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Jul 01 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N93000003168 (2)**

1. Corporation Name

**CHURCH OF GOD OF ABRAHAM INC.**

Principal Place of Business

**2701 S RIO GRANDE AVE.  
ORLANDO FL 32805**

Mailing Address

**2701 S RIO GRANDE AVE.  
ORLANDO FL 32805-6142**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
<b>21 1019 GOLDWYN ROAD</b>		<b>26 P.O. BOX 555219</b>		<b>07/14/1993</b>		<b>05/01/1996</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
<b>22</b>		<b>27</b>		<b>59-3198135</b>		<b>Not Applicable</b>	
City & State <b>ORLANDO, FL</b>		City & State <b>ORLANDO, FL</b>		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>23</b>		<b>28</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Zip <b>32805</b>		Country <b>ORANGE</b>		Zip <b>32855-5219</b>		Country <b>ORANGE</b>	
<b>24</b>		<b>25</b>		<b>29</b>		<b>30</b>	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

**CHARLES, JEAN R  
5468 N. WOODCREST DR.  
WINTER PARK FL 32792**

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CHARLES, JEAN R.</b>	1.2 NAME	
STREET ADDRESS	<b>5468 N WOODCREST DR</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WINTER PARK FL 32792</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FILS, MARCEL LARECE</b>	2.2 NAME	
STREET ADDRESS	<b>5468 N WOODCREST DR</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WINTER PARK FL</b>	2.4 CITY-ST-ZIP	
TITLE	<b>DS</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>AUGUSTIN, CALIXTE</b>	3.2 NAME	
STREET ADDRESS	<b>6040 CASA DEL REY CIRCLE, APT. A</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ORLANDO FL</b>	3.4 CITY-ST-ZIP	
TITLE	<b>T</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SEVERE, MAURICE</b>	4.2 NAME	
STREET ADDRESS	<b>1203 CHESTERTON AVE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ORLANDO FL</b>	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		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 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:

SIGNATURE **DELETED**

06-23/97

CR2E037 (9/96)