

FILE NOW: FILING FEE IS \$61.25

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90022 015 ****61.25

0090522

NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # N93000003806

1. Corporation Name

THE GOSPEL TRUTH PENTECOSTAL CHURCH, INC.

Principal Place of Business

Mailing Address

712 S.W. 6 AVENUE HOMESTEAD FL 33030

P.O. BOX 900928 HOMESTEAD FL 33030



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/18/1993

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

4. FEI Number 65-0491395

Applied For Not Applicable

23. City & State

27. City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24. Zip

Country

28. Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RILEY, JULIUS L 15540 HARRISON DRIVE LEISURE CITY FL 33033

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 Julius L. Riley

SIGNATURE Julius L. Riley

DATE 4/26/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD RILEY, JULIUS L. 15540 HARRISON DRIVE LEISURE CITY FL 33030

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

TITLE SD RILEY, CONNIE 684 N.W. 9TH STREET FLORIDA CITY FL 33034

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

TITLE VD NEWTON, WILLIE 10719 S.W. 225 STREET GOULD FL 33170

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

TITLE TD SIMMONS, WILLIE 11383 S.W. 227 TERRACE GOULD FL 33170

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

TITLE SD GRIFFITH, AISHA 249 N.E. 12TH AVENUE HOMESTEAD FL 33030

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

TITLE TD RICH, JOANN A 10759 S.W. 226 STREET GOULD FL 33170

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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: A Rich 4/27/99 238-4374

CR2E037 (11/98)