

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **N94000002506 (3)**

1. Corporation Name

ST. JAMES CHURCH OF GOD IN UNITY, INC.

FILED

99 JUN -5 AM 9:59

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

**2171 DIXIE AVENUE
SANFORD FL 32771**

**2171 DIXIE AVENUE
SANFORD FL 32771**

3. Date Incorporated or Qualified

05/16/1994

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

21 335 Maytown Road

Suite, Apt. #, etc.

22

City & State

23 Osteen, FL

Zip

24 32771

Country

25 USA

2a. Mailing Address

26 2172 Dixie Avenue

Suite, Apt. #, etc.

27

City & State

28 Sanford, FL

Zip

29 32771

Country

30 USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LINGARD, JASPER L ELDER
2171 DIXIE AVENUE
SANFORD FL 32771**

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 617.0507, Florida Statutes.

SIGNATURE **Elder Jasper Lingard**

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

(NOTE: Registered agent signature required when instituting)

4-16-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE

NAME **LINGARD, JASPER**
STREET ADDRESS **2171 DIXIE AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE **TD** ☐ DELETE

NAME **LINGARD, ELMORA**
STREET ADDRESS **2171 DIXIE AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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TITLE **SD** ☐ DELETE

NAME **KEY, CAROL**
STREET ADDRESS **2171 DIXIE AVENUE**
CITY-ST-ZIP **SANFORD FL 32771**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE **ASD** ☐ DELETE

NAME **PINNOCK, GLENNIE F**
STREET ADDRESS **3134 BYINGTON TERR.**
CITY-ST-ZIP **DELTONA FL 32738**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 19.07(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

407-322-8697

CR2E037 (10/97)