

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 14 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 # N94000004443 (7)**  
1. Corporation Name  
**JESUS OF NAZARETH HOLY TABERNACLE PENTECOSTAL CHURCH, INC.**



Principal Place of Business <b>2601 N. HAYNES ST. PENSACOLA FL 32501</b>	Mailing Address <b>2601 N. HAYNES ST. PENSACOLA FL 32503-3768</b>
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3. Date Incorporated or Qualified <b>09/13/1994</b>	3a. Date of Last Report <b>04/24/1996</b>
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21. Principal Place of Business Suite, Apt. #, etc.	2a. Mailing Address Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip Country	29. Zip Country
25. Zip Country	30. Zip Country

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent  
**DAWSON, DAISY B  
1101 NORTH WEBSTER DR  
PENSACOLA FL 32505**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City <b>FL</b> 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 DAISY B. DAWSON + Bishop Daisy B Dawson 02-26-97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when repeating) DATE

12. OFFICERS AND DIRECTORS

TITLE	OD	<input checked="" type="checkbox"/> DELETE
NAME	DAWSON, PERCY	
STREET ADDRESS	1101 N. WEBSTER DR.	
CITY-ST-ZIP	PENSACOLA FL 32505	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	HODGES, HAROLD L	
STREET ADDRESS	8541 MACK STREET	
CITY-ST-ZIP	PENSACOLA FL 32514	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	HODGES, BARBARA A	
STREET ADDRESS	8541 MACK STREET	
CITY-ST-ZIP	PENSACOLA FL 32514	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JESSIE GIDEON	
1.3 STREET ADDRESS	3707 KELLY AVE.	
1.4 CITY-ST-ZIP	PENSACOLA FL 32505	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 checked, as on an attached address.

Jessie Gideon 904 433-6151

CR2E037 (9/96)