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

POCUMENT # N9500001565 (9)

HARRIS CHAPEL LIFE ENRICHMENT CENTER, INC

FILED Apr 14 1998 8:00am Secretary of State

10/11/10					 	
rincipal Place of Business		Mailing Addres	S	I IBBITION AND TOTAL CITIES OR AN SOLIL GOLLS COILD HILDS OF HE OFFICE OF HE	I BIII IBBI	
isi n.w. 26th st Akland Park fl		P.O. BOX 5242 FT. LAUDERDALE	E FL 33310-5242	3. Date Incorporated or Qualified 04/04/1995 4. FEI Number NOT APPLICABLE Not Applied For		
Principal Place of Business		2a. Mailing Add	ress	5. Certificate of Status Desired S8.75 Add		
Suite, Apt. #, etc.		Suite, Apt. #	f, etc.	6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F		
City & State		City & State		7. Is this nonprofit corporation a homeowners association? Yes No		
Zip]	Country 25	Zip	Country 30	8. This corporation owes or has paid the current year Intan Personal Property Tax due June 30. Yes		
0	. Name and Address of Cu	rrent Registered Agent	10. Name and Address of New Registered Agent			

MURPHY, EDDIE L JR.
2351 N.W. 26TH ST.
OAKLAND PARK FL 33311

82 Street Address (P.O. Box Number is Not Acceptable)

83 Street Address (P.O. Box Number is Not Acceptable)

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 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.

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SIGNATURE Signature, typed or grinted name of registered agent and title if applicable. (NOTE: Registered Agent stonature required when reinstating) DATE											
	Signature, typed or printed name of registered agent and title if a	· · · · · · · · · · · · · · · · · · · 		<u> </u>							
12.	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFICERS							
TITLE	DT	☐ DELETE	1.1 TITLE	Secretary/Director	Change	Addition					
NAME	SIMMONS, WILLIE L		1.2 NAME	Thedoshia Brown							
STREET ADDRESS	421 NW 29 AVE		1.3 STREET ADDRESS	2200 N. W. 33 Ave							
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP	<u> Lauderdale Lakes, Fla</u>							
TITLE	DP	ALA DELETE	2.1 TITLE	Director	Change	XX Addition					
NAME	LEWIS, EVELYN J		2.2 NAME	Eloise DeHart							
STREET ADDRESS	426 N.W 9TH AVE.		2.3 STREET ADDRESS	4550 NW 13 St.							
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP	Lauderhill, Fla 3331							
TITLE	DT	2 DELETE	3.1 TITLE	Director	Change	Addition					
NAME	GRISHAM, CLARENCE		3.2 NAME	Ernest Hamilton							
STREET ADDRESS	2340 N.W. 29TH ST.		3.3 STREET ADDRESS	2621 NW 17 St							
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-ST-ZIP	Ft. Lauderdale, Fla	<u> 33311 </u>						
TITLE	D	XX DELETE	4.1 TITLE		☐ Change	Addition					
NAME	HOWELL, RUBYE H		4. 2 NAME								
STREET ADDRESS	1536 N.W. 12TH TERRACE		4.3 STREET ADDRESS								
CITY-ST-ZIP	FT. LAUDERDALE FL 33311		4.4 CITY - ST-ZIP								
TITLE	D P	☐ DELETE	5.1 TITLE		Change	Addition					
NAME	Batie, gwendolyn c		5.2 NAME								
STREET ADDRESS	2770 N.W. 26TH AVE.		5.3 STREET ADDRESS								
CITY-ST-ZIP	FT. LAUDERDALE FL 33311		5.4 CITY-ST-ZIP								
TITLE	D	DELETE	6.1 TITLE		☐ Change	Addition					
NAME	GILES, ALPHONSO		6.2 NAME								
STREET ADDRESS	2663 N.W. 8TH RD.		5.3 STREET ADDRESS								

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 1317. Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter on the corporation of the corporat

SIGNATURE: _

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