

FILE NOW: FILING FEE IS \$61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # N95000002995 (7)

1. Corporation Name:

PRAISE TABERNACLE OUTREACH CENTER, INC.



Principal Place of Business

1860 SW 37TH WAY
FORT LAUDERDALE FL 33312

Mailing Address

1860 SW 37TH WAY
FORT LAUDERDALE FL 33312

3. Date Incorporated or Qualified
06/21/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **2121 W. OAKLAND PK BLVD**

26 **P.O. Box 100556**

4. FEI Number
05-0584283

Applied For

Not Applicable

22 **142**

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23 **OAKLAND PK FLA**

28 **OAKLAND PK B FLA**

Zip

Country

Zip

Country

24 **33310**

25 **U.S.**

29 **33310**

30 **U.S.**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRIGHT, DELORES
1860 SW 37TH WAY
FORT LAUDERDALE FL 33312**

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

Delores Bright Pastor

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **BRIGHT, DELORES**
STREET ADDRESS **1860 SW 37TH WAY**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **D** ☐ DELETE
NAME **GLENN, KIM**
STREET ADDRESS **1701 SW 11TH COURT STE 2**
CITY-ST-ZIP **FORT LAUDERDALE FL 33311**

TITLE **D** ☐ DELETE
NAME **WRIGHT, SANDRA**
STREET ADDRESS **1860 SW 37TH WAY**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE **D** ☐ DELETE
NAME **BRIGHT, BRENDA**
STREET ADDRESS **2121 SW 42ND AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**Bright Sandra
2054 NW 43rd Terr #8
Lauderhill FLA 33313**

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delores Bright

Delores Bright

Pastor

2/12/96

954-583-0003

486-1070

CR2E037 (12/95)