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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

986 COCONUT CIR. W.

N96000000841 (4)

Mailing Address

986 COCONUT CIR. W. NAPLES FL 34104-4611

LA SENDA ANTIGUA (PENTECOSTAL CHURCH OF THE OLD PATH) OF NAPLES, INCORPORATED

NAPLES FL 33942 3. Date Incorporated or Qualified 02/19/1996 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 **Trust Fund Contribution** Added to Fees 28 Country Country Zip This corporation has liability for intangible tax under s. 199.032, Zic 29 30 Florida Statutes Yes No 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name STEWART, JAMES C JR. 82 Street Address (P.O. Box Number is Not Acceptable) STEWART & STORTER, ATTORNEYS AT LAW Bä 2121 COUNTRY RD. 951, STE. 101 **GOLDEN GATE FL 33999** 84 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Addition TITLE RIVERA. REVEREND W NAME 1.2 NAME 986 COCONUT CIR. W. STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 33942 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE ORTIZ. ANTONIO NAME 2.2 NAME 2896 48TH TER. S.W. 2.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33999 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE DELETE 3.1 TITLE Change DONES, JOSE R 32 NAME NAME 998 GROVES RD. 3.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33964 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 4.1 TITLE Change TITLE RIVERA, LEIDA J NAME 4.2 NAME 986 COCONUT CIR. W. STREET ADDRESS 4.3 STREET ADDRESS NAPLES FL 33942 CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE Change TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

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 63.5. Florida statutes; and that my name

SIGNATURE: 1-2-101

STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address

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FILED

Feb 13 1997 8:00am

Secretary of State