SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

APPROVED AND FILED

98 OCT -1 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 of 3

0006525

NONPROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # N96000001051 (9)

1. Corporation Name

INDEPENDENT ASSEMBLIES OF GOD (FLORIDA) INC.

Principal Place of Business	Mailing Address
4146 NW 48 AVENUE LAUDERDALE LAKES FL 33319	4146 NW 48 AVENUE LAUDERDALE LAKES FL 33319

3. Date Incorporated or Qualified: 02/27/1996

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

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
WILSON, KEITH REV. 1020 S.W. 76TH AVENUE N LAUDERDALE FL 33068	81 Name: WILSON KEITH Rev. 82 Street Address (P.O. Box Number Is Not Acceptable): 4146 NW 48 AVE. 83 LAUDERDALE LAKES Fl. 33319 84 City: FL 85 Zip Code: 3

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	PD	☑ Change ☐ Addition
NAME	WILSON, KEITH REV.		1.2 NAME	WILSON, KEITH REV.	
STREET ADDRESS	1020 S.W. 76TH AVE.		1.3 STREET ADDRESS	4146 NW 48 AVE	
CITY-ST-ZIP	N LAUDERDALE FL		1.4 CITY-ST-ZIP	LAUDERDALE LAKES FL. 33319	
TITLE	TV	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HAMILTON, NEVILLE REV.		2.2 NAME	B0000265559B---9	
STREET ADDRESS	11 CLARK AVENUE EWARTON, PO ST. CATHERINE		2.3 STREET ADDRESS	-10/05/98--01080--004	
CITY-ST-ZIP	JAMAICA WEST INDIES		2.4 CITY-ST-ZIP	*****75.00 *****75.00	
TITLE	ST	☐ DELETE	3.1 TITLE	ST	☑ Change ☐ Addition
NAME	WILSON, MABEL E		3.2 NAME	WILSON, MABEL M.	
STREET ADDRESS	1020 S.W. 76TH AVE.		3.3 STREET ADDRESS	4146 NW 48 AVENUE	
CITY-ST-ZIP	N LAUDERDALE FL 33068		3.4 CITY-ST-ZIP	LAUDERDALE LAKES FL. 33319	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☑ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

10-2-98

14. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Keith Wilson 9/24/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (5/98)

INDEPENDENT ASSEMBLIES OF GOD (FLORIDA) INC.

2003

Principal Place of Business	Mailing Address
4146 NW 48 AVENUE LAUDERDALE LAKES FL 33319	4146 NW 48 AVENUE LAUDERDALE LAKES FL 33319

3. Date Incorporated or Qualified: 02/27/1996

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2.a Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

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
WILSON, KEITH REV. 1020 S.W. 76TH AVENUE N LAUDERDALE FL 33068	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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	Trustee	☐ Change ☑ Addition
NAME	WILSON, KEITH REV.		1.2 NAME	WILSON KEITH REV.	
STREET ADDRESS	1020 S.W. 76TH AVE.		1.3 STREET ADDRESS	4146 NW 48 AVE	
CITY-ST-ZIP	N LAUDERDALE FL		1.4 CITY-ST-ZIP	LAUDERDALE LAKES FL. 33319	
TITLE	TV	☐ DELETE	2.1 TITLE	TRUSTEE	☐ Change ☑ Addition
NAME	HAMILTON, NEVILLE REV.		2.2 NAME	LEIGHTON WILSON	
STREET ADDRESS	11 CLARK AVENUE EWARTON, PO ST. CATHERINE		2.3 STREET ADDRESS	6280 NW 19ST	
CITY-ST-ZIP	JAMAICA WEST INDIES		2.4 CITY-ST-ZIP	SUNRISE FL. 33313	
TITLE	ST	☐ DELETE	3.1 TITLE	TRUSTEE	☐ Change ☑ Addition
NAME	WILSON, MABEL E		3.2 NAME	WILSON MABEL M.	
STREET ADDRESS	1020 S.W. 76TH AVE.		3.3 STREET ADDRESS	4146 NW 48 AVE.	
CITY-ST-ZIP	N LAUDERDALE FL 33068		3.4 CITY-ST-ZIP	LAUDERDALE LAKES FL. 33319	
TITLE		☐ DELETE	4.1 TITLE	Trustee	☐ Change ☑ Addition
NAME			4.2 NAME	HARRISON KENT.	
STREET ADDRESS			4.3 STREET ADDRESS	3390 NW 46 AVE.	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	LAUDERDALE LAKES FL. 33319	
TITLE		☐ DELETE	5.1 TITLE	TrusTEE	☐ Change ☑ Addition
NAME			5.2 NAME	STALEY EVElynna	
STREET ADDRESS			5.3 STREET ADDRESS	2286 NW56 AVE	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	LAUDER	
TITLE		☐ DELETE	6.1 TITLE	TRUSTEE	☐ Change ☑ Addition
NAME			6.2 NAME	O'connor Hycinth	
STREET ADDRESS			6.3 STREET ADDRESS	9920 SW 41st	

CR2E037 (5/98)

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22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
23. City & State	28. City & State	7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
24. Zip / 25. Country	29. Zip / 30. Country	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
WILSON, KEITH REV. 1020 S.W. 76TH AVENUE N LAUDERDALE FL 33068	81 Name 82 Street Address (P.O. Box Number Is Not Acceptable) 83 84 City FL 85 Zip Code

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12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	Trustee	☐ Change ☑ Addition
NAME	WILSON, KEITH REV.		1.2 NAME	Buchanan Glenford	
STREET ADDRESS	1020 S.W. 76TH AVE.		1.3 STREET ADDRESS	3527 NOSTrand AVE Apt 4C	
CITY-ST-ZIP	N LAUDERDALE FL		1.4 CITY-ST-ZIP	Brooklyn NY 11229	
TITLE	TV	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HAMILTON, NEVILLE REV.		2.2 NAME		
STREET ADDRESS	11 CLARK AVENUE EWARTON, PO ST. CATHERINE		2.3 STREET ADDRESS		
CITY-ST-ZIP	JAMAICA WEST INDIES		2.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	WILSON, MABEL E		3.2 NAME		
STREET ADDRESS	1020 S.W. 76TH AVE.		3.3 STREET ADDRESS		
CITY-ST-ZIP	N LAUDERDALE FL 33068		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
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CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (5/98)