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FILED  
May 05 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # N96000001284 (6)

1. Corporation Name

TEMPLE OF PRAISE CHURCH OF GOD IN CHRIST, INC.



Principal Place of Business

Mailing Address

321 ANTON DRIVE  
TALLAHASSEE FL 32312-1401

321 ANTON DRIVE  
TALLAHASSEE FL 32312-1401

3. Date Incorporated or Qualified

03/07/1996

4. FEI Number

59-3349264

Applied For

Not Applicable

2. Principal Place of Business

21 1609 BRANCH ST.

Suite, Apt. #, etc.

22 Tallahassee

City & State

23 Tallahassee, FL

Zip

24 32303

Country

25 Leon

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

JONES, PASTOR DAVID  
321 ANTON DRIVE  
TALLAHASSEE FL 32312-1401

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 D ☐ DELETE  
NAME SMITH, RICHARD  
STREET ADDRESS 2120 SAXON ST  
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE D ☐ DELETE  
NAME BROWN, DAVID  
STREET ADDRESS 2014 DOOMAR DR.  
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE D ☐ DELETE  
NAME ALEXIS, ROLIN  
STREET ADDRESS 324 E. PERSHING ST  
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE D ☐ DELETE  
NAME JONES, DAVID  
STREET ADDRESS 321 ANTON DR  
CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
Secretary  
Jennifer L. Jones  
321 ANTON DRIVE  
TALLAHASSEE, FL 32312

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

David R. Jones

DAVID JONES

4-30-98

385-3660

CR2E037 (10/97)