


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 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 # N96000001713 (4)
1. Corporation Name
CHURCH OF GOD TRIANGLE HOPE MINISTRY, INC.



Principal Place of Business 1981 LINCOLN AVENUE MIAMI FL 33054	Mailing Address 1981 LINCOLN AVENUE MIAMI FL 33054
--	--

3. Date Incorporated or Qualified
03/29/1996

4. FEI Number 65-0176608	Applied For Not Applicable
------------------------------------	-------------------------------

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 25	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
**JONES, TYRONE VAN REV
3801 SW 31ST STREET
HOLLYWOOD FL 33023**

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> DELETE
NAME	WEECH, VERNAL REV	
STREET ADDRESS	801 SW 138TH AVENUE, PLYMOUTH E 201	
CITY-ST-ZIP	PEMBROKE PINES FL 33027	
TITLE	T	<input type="checkbox"/> DELETE
NAME	LANIER, DIKE MIN	
STREET ADDRESS	3510 N2 206TH STREET	
CITY-ST-ZIP	OPA-LOCKA FL 33056	
TITLE	T	<input type="checkbox"/> DELETE
NAME	ST CLOUD, JEAN DEACON	
STREET ADDRESS	332 NW 187 STREET	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE	T	<input type="checkbox"/> DELETE
NAME	STIRRUP, ROBERT	
STREET ADDRESS	751 CURTISS DRIVE	
CITY-ST-ZIP	OPA-LOCKA FL 33054	
TITLE	TT	<input type="checkbox"/> DELETE
NAME	FERGUSON, JR., ARLINGTON	
STREET ADDRESS	3110 N.W. 211TH STREET	
CITY-ST-ZIP	OPA-LOCKA FL 33056	
TITLE	TT	<input type="checkbox"/> DELETE
NAME	CARSWELL, TURNER	
STREET ADDRESS	2431 N.W. 170TH STREET	
CITY-ST-ZIP	OPA-LOCKA FL 33055	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	3510 N.W. 206th ST.
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Robert Stirrup* **Jan. 26 1998**

CR2E037 (10/97)