FILE NOW: FILING FEE IS \$61.25 .

IPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

N96000002296 Overcoming church FNC.

Pentecostal

APPROVED

1997 OCT -6 PH 12: 21

SECRETARY OF STATE TALLAHASSEE, FLORIDA

		v				
1 '	ce of Business	Mailing Address	*h /			
8573 Date street 1590 w37th str						
Hobe Sound Fl. 33475 Riviera Bch. Fl. 3340				33404	3. Date Incorporated or Qualified Apr. 1 29 1996	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 8573 Date street 26 1590 W 37 th			th stree	<u> </u>	65-0694497	Not Applicable
Suite, Apt.		Suite, Apl. #, etc. 27	·		Certificate of Status Desired	S8.75 Additional Fee Required
	e sound Fl.	- 	Bch. Fl.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
- Zip 24] 3347	Country 25 United state	Z ₁ ρ 29 33407	Country	d States	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, ☐ Yes
<u> </u>	9. Name and Address of Current	Registered Agent	130 Unite	C 71 9/152	10. Name and Address of New Re	
Anda	erson o Lorick Sr.		81	Name		
\ 					ess (P.O. Box Number is Not Acceptat	ole)
1570 - 371 Street						
Rivie	era Bch, F1, 33404		83			
			84	City		FL 85 Zip Code
1. Pursuant	t to the provisions of Sections 617.0502	and 617 1508. Florida Sta	Jules, the above	e-named coror	oration submits this statement for the r	,
Vi office or a	registered agent, or both, in the State cam familiar with, and accept the obligat	of Florida. Such change wa	is authorized by	the corporation	on's board of directors. I hereby accep	pt the appointment as registered
J -		A	^ / ^ / J	//.	Atich A (O) A.	+ 8 1997
♥SIGNATURE	Signature types or printed name of registered agent	k Sr. (Flder	IOTE Registered Ager	n: signature require	ed when roinstating)	gust 8,1997
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	# loer (P)	☐ DELETE	1.1 TITLE	1/2	4 4.1 1	Change Addition
NAME	Am Elder Anderson O.L.	orich or	1.2 NAME		der Anderson Lonica	t ar,
STREET ADDRESS			13 STREET /	1	90 with street	
CITY-ST-ZIP TITLE	Riviera Och. Pl. 334	DELETE	1.4 CITY - ST 2.1 TITLE		5/T Och. F1 33404	Change Addition
NAME	Donique L. Lonick			1	<u> </u>	Liji Shange Liji Addition
			2.2 NAME	Dog	nique hi horich	
STREET ADDRESS			23 STREET /	112	To water street	
CITY+ST-ZIP TITLE	Riviena B.L. F1, 33404	DELETÉ	2. 4 CITY - S'	1-71° X10	viera But. Fl. 33404	Change Addition
NAME	Timothy W. Lorick		32 NAME	T	nothy force	
STREET ADDRESS	1	our t	3.3 STREET		27 Townhouse cou	urt.
CITY-ST-ZIP	west Palm Beach Fl.		3.4. CITY- S1			
TITLE	D.	DELETE	4.1 TITLE		31 tell 11 24	Change Addition
NAME	Pamela Lorick		4. 2 NAME		400002:	3152941
STREET ADDRESS	3627 Townhows cour	· †	4.3 STREET A	ADDRESS	-10/08/	79701094nns
	West Pulm Beach F1. 3		4.4 CITY - ST	ì	*************************************	51.25 *****61.25
TITLE	D	DELETE	5.1 TITLE			Change Addition
NAME .	Recipe 11 Allen		5.2 NAME	[
STREET ADDRESS	The State of the second second		5.3 STREET #	ADDRESS		
CITY-ST-ZIP	Riviera Gol Fl. 334	ωu	5.4 CHY-ST	- ZIP		^
TITLE		DELETE	6 1 TITLE			☐ Challe ☐ Addition
NAME			6.2 NAME			10 61
STREET ADDRESS	1		6.3 STREET A	ADDRESS		"DIET
CITY-ST-ZIP	}		6.4 CITY - ST	- 21P		101

Improved in the same legal effect as it made under data and accurate and that my signature shall have the same legal effect as it made under data and 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.