

4-25-97 B-5526 C  
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FILED  
 Apr 25 1997 8:00am  
 Secretary of State



NONPROFIT CORPORATION  
 ANNUAL REPORT  
 1997

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

DOCUMENT # N96000002333 (0)  
 1. Corporation Name  
 PENTECOSTAL CHURCH OF GOD OF THE PALM BEACHES, I  
 NC.



Principal Place of Business Mailing Address  
 107 SE 2ND STREET DELRAY BEACH FL 33445  
 107 SE 2ND STREET DELRAY BEACH FL 33444-3613

3. Date Incorporated or Qualified 05/01/1996  
 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 310 Sterling Avenue  
 22 City & State 27  
 23 Zip Country 28 Delray Beach, FL  
 24 25 29 33444 30 USA

4. FEI Number  Applied For  
 Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional  
 Fee Required  
 6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be  
 Added to Fees  
 8. This corporation has liability for intangible tax under s. 199.032,  
 Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
 BUSBY, ALBERTO F  
 706 SW 23 AVE.  
 BOYNTON BEACH FL 33435

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	PD	<input type="checkbox"/> DELETE
NAME	MERVILUS, LOUIS REV.	
STREET ADDRESS	310 STERLING AVE.	
CITY-ST-ZIP	DELRAY BEACH FL 33444	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	CALVERT, SOPHONIE	
STREET ADDRESS	1620 ILENE COURT	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	VILBRUN, VILSAINT	
STREET ADDRESS	1610 S. CONGRESS AVE.	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Monfort, Leonard	
2.3 STREET ADDRESS	2201 Linton Blvd.	
2.4 CITY-ST-ZIP	DELRAY BEACH, FL 33445	
3.1 TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Fieffie, Rigal	
3.3 STREET ADDRESS	2165 Catherine Drive	
3.4 CITY-ST-ZIP	DELRAY BEACH, FL 33445	
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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_

CR2E037 (9/96)