

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004 8:00 am
Secretary of State

05-14-2004 90011 029 ****61.28

DOCUMENT # N96000002853

1. Entity Name
FELLOWSHIP SPIRITUAL APOSTOLIC CHURCH, INC.



Principal Place of Business

~~1653 NW 140 ST~~
~~MIAMI, FL 33168~~

old address

Mailing Address

~~4653 NW 119 ST~~
~~MIAMI, FL 33168~~

old address

24075436



2. Principal Place of Business

2324 SW 60TER

Suite, Apt. #, etc.
MIAMI, FL

City & State
33023

Zip

Country
Broward

3. Mailing Address

2324 SW 60TER

Suite, Apt. #, etc.
MIAMI, FL

City & State
FL

Zip

33023

Country
Broward

04282004 Chg-NP

CR2E037 (10/03)

4. FEI Number
65-0756901

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCDONALD, ICILDA
~~745 NW 176TH TER~~
~~MIAMI, FL 33161~~

7. Name and Address of New Registered Agent

Name
JOYCE PEARCE

Street Address (P.O. Box Number is Not Acceptable)

~~10700 NE 21AVE~~

City
N. Miami Beach

FL Zip Code
33160

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Joyce Pearce

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP
NAME PIERCE, JOYCE
STREET ADDRESS 11000 NE 9TH CT.
CITY- ST- ZIP MIAMI, FL 33161 ☐ Delete

TITLE DS
NAME MCDONALD, ICILDA R
STREET ADDRESS 745 NW 176TH TER.
CITY- ST- ZIP MIAMI, FL 33161 ☐ Delete

TITLE DT
NAME BECKFORD, JOETTA
STREET ADDRESS 500 NE 33RD ST., #16
CITY- ST- ZIP MIAMI, FL 33137 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joyce Pearce

5-10-04

Date

Daytime Phone #