

"AMENDED"

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N96000003629 (0)
1. Corporation Name

OPEN DOOR BIBLE CHURCH, INC.

Principal Place of Business
2000 BANKS ROAD
SUITE D-1
MARGATE, FL 33063

Mailing Address
2000 BANKS ROAD
SUITE D-1
MARGATE, FL 33063

2. Principal Place of Business
21 720 S.W. 12TH AVENUE
Suite, Apt. #, etc.

2a. Mailing Address
26 720 S.W. 12TH AVENUE
Suite, Apt. #, etc.

22 City & State
23 POMPADNO BEACH, FL
24 Zip 33069
25 Country USA

27 City & State
28 POMPADNO BEACH, FL
29 Zip 33069
30 Country USA

3. Date Incorporated or Qualified
07/10/96

3a. Date of Last Report
01/19/98

4. FFI Number
105-0079757

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

10. Name and Address of New Registered Agent

SAFIER, KERRY D.
123 N.W. 13TH STREET, #300
BOCA RATON, FL 33432

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/P
NAME HORSLEY, MICHAEL
STREET ADDRESS 2000 BANKS ROAD, #D-101
CITY-ST-ZIP MARGATE, FL 33063

1.1 TITLE D/V
1.2 NAME HORSLEY, MICHAEL
1.3 STREET ADDRESS 720 S.W. 12TH AVENUE
1.4 CITY-ST-ZIP POMPADNO BEACH, FL 33069

TITLE D/V/S/T
NAME SAFIER, KERRY D.
STREET ADDRESS 123 N.W. 13TH STREET, #300
CITY-ST-ZIP BOCA RATON, FL 33432

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

TITLE V
NAME PAYNE, DOUGLAS J.
STREET ADDRESS 1865 S.W. 4TH AVENUE, SUITE D-1
CITY-ST-ZIP DELRAY BEACH, FL 33444

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE D/P
4.2 NAME DUCASSE, KENNETH W.
4.3 STREET ADDRESS 5510 LYONS ROAD, #101
4.4 CITY-ST-ZIP COCONUT CREEK, FL 33073

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL HORSLEY, V.P.

12-2-98

Date

954-946-7575

Daytime Phone #

FILED

98 DEC -7 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E037 (9/96)