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Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90141 022 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000004286

1. Corporation Name
ANGLICAN APOSTOLIC CHURCH INTERNATIONAL INC

Principal Place of Business 740 NW 43RD AVENUE PLANTATION FL 33317	Mailing Address 740 NW 43RD AVENUE PLANTATION FL 33317
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2. Principal Place of Business 21 1416 SE 2nd Terrace Suite, Apt. #, etc. 22 Deerfield Bch. - Florida City & State 23 33441 USA Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country	3. Date Incorporated or Qualified 08/16/1996	4. FEI Number 65-0690362 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent HANLAN, RAYMOND G REV 740 NW 43RD AVENUE PLANTATION FL 33317	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANLAN, RAYMOND G REV	1.2 NAME	
STREET ADDRESS	740 NW 43RD AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33317	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORALES, LUCIO	2.2 NAME	
STREET ADDRESS	125 NE 15TH AVENUE., APT 202	2.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI FL 33161	2.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANLAN, LEONIE	3.2 NAME	
STREET ADDRESS	6510 SW 16TH CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33068	3.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POPE, SANDRA	4.2 NAME	
STREET ADDRESS	4507 CARAMBOLA CIRCLE S.	4.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL 33066	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FAIRWEATHER, JUNE	5.2 NAME	
STREET ADDRESS	5098 NW 41ST CT	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33319	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLY, SUSAN	6.2 NAME	
STREET ADDRESS	4611 SW 30TH WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	DANIA FL 33312	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, with all other like empowered.

SIGNATURE: *[Signature]* **3-2-99 (954) 584-3280**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (11/98)