**FILED** 

Jul 09, 1999 8:00 am Secretary of State

07-09-1999 90003 040 \*\*\*\*61.25

584677 - 90003 - 40

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N9600006103

1. Corporation Name

G.C. GOSPEL SINGERS, INC.

Principal Place of Business  2981 N W 47TH STREET  MIAMI FL 33142					Mailing Address						<del></del>	· · ·	-
					2981 NW 47TH ST MIAMI FL-33142								
2. Principal Place of Business					2a. Mailing Address				_	Date Incorporated or Qualifed     12/02/1996	j	<u> </u>	
Suite, Apt. #, etc.					Suite, Apt. #, etc.					4. FEI Number	_	Арг	plied For
.2										65-0776655			Applicable
City & State					City & State				5. Certifcate of Status Desired		<b>\$8.75</b> A Fee Red		
Zip Country					Zip Coun			•	6. Election Campaign Financing		_ '	\$5.00	May Be
25					<u> </u>	30				Trust Fund Contribution	_	Added to	> Fees
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
							81	Name					
MCCREA, LILLIE B							82	82 Street Address (P.O. Box Number is Not Acceptable)					-
2981 NV MIAMI FI	/ 47TH ST										_		
MIMMIF	L 33 142						<u></u>					Jos I Zin C	`ada
							84	City			FL	85 Zip C	,ode
agent. I a	,		d accept the obligated age		of, Section 617.0503, Flore if applicable. (NOTI				w beniupe	vhen reinstating)	DATE		
12.			OFFICERS AN	ND DIR						ADDITIONS/CHANGES TO O	FFICERS A	ID DIRECTO	RS IN 12
TITLE	D				DELETE	1,1	TITLE					Change	☐ Addition
NAME	MCCREA	À, LIL	JE B		_	1.21	NAME						ē
STREET ADDRÉSS	1				The Commerciation of the Comme	1.3 STREET ADD							-
CITY-ST-ZIP	MIAMI FL 33142							T- ZIP				ETI dell'una	C Addition
TITLE	D							2.1 TITLE <b>D</b>				Change	Addition
NAME	SMITH,					2.2 NAM			AU	UNDREAS. COLEMAN 3004 DOUGLAS AVE. 4. Myers, FIA. 33916			
STREET ADDRESS			STREET					3 STREET ADDRESS		204 DOUGLAS AVE 1			
CITY-ST-ZIP	DANIA FL 33009				DELETE	_	2.4 CITY-ST-ZIP 3.1 TITLE			. myers, FIA.		Change	Addition
TITLE	D IENKING TONIA						3.1 IIILE 3.2 NAME			•		CJ 01.29-	٠
VAME	JENKINS, TONJA 10880 SW 220TH ST							ADDRESS					
STREET ADDRESS	MIAMI FI						CITY-S						
DITY-ST-ZIP		_ 001			☐ DELETE		TITLE	2.1		<del></del>		☐ Change	Addition
VAME						4.2	NAME	ļ					
STREET ADDRESS	1					4.3	STREET	ADDRESS					
CITY-ST-ZIP	ŀ					4,41	CITY-S	T-ZIP					
TITLE				_	☐ DELETE		TITLE	ŀ				Change	Addition
NAME						5.2	NAME						
STREET ADDRESS	1					5.3	STREET	ADDRESS					
CITY-ST-ZIP				_			CITY-S	T-ZIP					
atte					☐ DELETE	6.1	TITLE	į				Change	Addition

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TILE

VAME

STREET ADDRESS

CITY-ST-ZIP