

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90053 047 ****70.00

005038

DOCUMENT # N97000001462

1. Corporation Name

WORD OF GOD MINISTRIES OF TAMPA, INCORPORATED

Principal Place of Business

REV. BETTY J. DORSEY
6608 N. 23RD STREET
TAMPA FL 33610

Mailing Address

REV. BETTY J. DORSEY
6608 N. 23RD STREET
TAMPA FL 33610



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

03/17/1997

4. FEI Number

59-3433382

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

9. Name and Address of Current Registered Agent

DORSEY, BETTY J
6608 N. 23RD STREET
TAMPA FL 33610

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE SD
NAME WATLEY, CAPRI F
STREET ADDRESS 6608 N. 23RD STREET
CITY-ST-ZIP TAMPA FL 33610 ☐ DELETE

TITLE TD
NAME ANDERSON, SANDRA F
STREET ADDRESS P.O. BOX 173431
CITY-ST-ZIP TAMPA FL 33672 ☐ DELETE

TITLE PD
NAME DORSEY, BETTY J
STREET ADDRESS 6608 N. 23RD STREET
CITY-ST-ZIP TAMPA FL 33610 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SD
1.2 NAME WATLEY, CAPRI F.
1.3 STREET ADDRESS 6608 N. 23RD STREET
1.4 CITY-ST-ZIP TAMPA FL 33610 ☐ Change ☐ Addition

2.1 TITLE TD
2.2 NAME ANDERSON, SANDRA F.
2.3 STREET ADDRESS P.O. BOX 173431
2.4 CITY-ST-ZIP TAMPA FL 33610 ☐ Change ☐ Addition

3.1 TITLE PD
3.2 NAME DORSEY, BETTY J.
3.3 STREET ADDRESS 6608 N. 23RD STREET
3.4 CITY-ST-ZIP TAMPA FL 33610 ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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:

BETTY J. DORSEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/16/1999

Date

813-237-8650
813-232-7544

Daytime Phone #

CR2E037 (1/198)