

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
May 11, 1999 8:00 am
Secretary of State

05-11-1999 90042 024 ****61.25

DOCUMENT # N97000001706

1. Corporation Name

**THE SANCTUARY OF PRAYER, PRAISE & WORSHIP. THE A
CTS 2 CHURCH, INC.**

Principal Place of Business

**280 IOWA AVE.
FT. LAUDERDALE FL 33312**

Mailing Address

**280 IOWA AVE.
FT. LAUDERDALE FL 33312**

595906 - 90042 - 29



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip **25** Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip **29** Country **30**

3. Date incorporated or Qualified

03/26/1997

4. FEI Number

65-0740280

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

**ROSEGREEN, ANSEL
280 IOWA AVE.
FT. LAUDERDALE FL 33312**

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 **T** ☐ DELETE
NAME **ROSEGREEN, ANSEL**
STREET ADDRESS **280 IOWA AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **T** ☐ DELETE
NAME **ROSEGREEN, NORMA**
STREET ADDRESS **280 IOWA AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE **T** ☐ DELETE
NAME **BOONE, CAROL**
STREET ADDRESS **280 IOWA AVE.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

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 ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

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

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:

4/26/99 **(954) 321-8674**

CR2E037 (11/98)

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EXECUTIVE COMMITTEE

ANSEL ROSEGREEN
280 Iowa Avenue
Ft. Lauderdale, FL 33312

- PRESIDENT

NORMA ROSEGREEN
280 Iowa Avenue
Ft. Lauderdale, FL 33312

- VICE PRESENT

CARROL BOONE
4804 N W 9th Drive
Plantation, FL 33317

- SECRETARY

PHYLLIS MCMORRIN
4587 N W 41st Street
Lauderdale Lakes, FL 33319

- TREASURER

VICTOR SMITH
3639 N W 83rd Lane
Sunrise, FL 33351

- ASSISTANT TREASURER