

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N 97000004184**
1. Corporation Name
Love God Ministries of Tallahassee, Inc.

Principal Place of Business
**3011 Setter Ct
Tallahassee FL 32303**

Mailing Address
**3011 Setter Ct
Tallahassee FL 32303**

3. Date Incorporated or Qualified
5/97

4. FEI Number
59-3412243

Applied For
☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Ricardo J. Correa-Torres
3011 Setter Ct
Tallahassee FL 32303**

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 **D** **PRESIDENT** ☐ DELETE
NAME **John E. Riccobono**
STREET ADDRESS **3011 Setter Ct**
CITY-ST-ZIP **Tallahassee FL 32303**

TITLE **D** **VICE PRESIDENT** ☒ DELETE
NAME **Rachel Gilliam**
STREET ADDRESS **1711 Meridian Rd**
CITY-ST-ZIP **Tallahassee FL 32303**

TITLE **D** **TREASURER** ☐ DELETE
NAME **Ricardo J. Correa-Torres**
STREET ADDRESS **3011 Setter Ct**
CITY-ST-ZIP **Tallahassee FL 32303**

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

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE **D** **VICE PRESIDENT** ☒ Change ☒ Addition
22 NAME **WALTER L. Graham**
23 STREET ADDRESS **5648 AEMON Lane**
24 CITY-ST-ZIP **Tallahassee, Florida 32304**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 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

SIGNATURE: **Ricardo J. Correa-Torres** **RICARDO J. CORREA-TORRES** **5/12/98** **(850)644-3524**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/97)