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PROFIT CORPORATION -ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jun 18, 1999 8:00 am Secretary of State

06-18-1999 90012 002 ***550.00

DOCUMENT # N98000003972

1. Corporation Name

Principal Place of Business

Church of Power, Inc.

LigxRaimmeedx&gark KiesimmeexxRkxx34x44		219×Raimmesy×Kk××24744				DO NOT WRITE IN THIS SPACE					
					l l	Incorporated 7/8/98	or Qualifed				
2. Principal P	face of Business	2a. Mailing Address	4. FEI N	umber				Applied Fo	70		
∄ 400 J	uno Largo Drive	26 400 Juno Lar	65-08	374128				Not Applic			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.7	5 Addition			
#305		27 #305	5. Certifo	cate of Statu	is Desired			Required			
City & Stat	e	City & State			6. Election	on Campaig	n Financino		\$5.0)0 May Be	
Juno Beach, FL 33408		Juno Beach, FL 33408			3	Fund Contril	-			ed to Fees	•
Zip	Country	Zip	Country		8. This c	ornoration o	wes the curr	ent vear			
<u>-</u> 33408	25	29 33408 3	ดิ		I	nal Property		-, ,	Yes	🖾 No	
	9. Name and Address of Current I		-			<u>-</u>	ss of New F	Registere	ed Agent		
			81	Name	thew Zifro						_
Steve	n Barry						· · ·				
219 P	almwood Court					ress (P.O. Box Number is Not Acceptable) E 6th Street, 15th Floor					
Kissi	mmee, FL 34744		83	110	DE OUI DI	creec,	IJUII I	1001			
	· ·										
			84		Lauderdal	le		F	85 Z	ip Code 3301	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named c	corporation submi	its this state	ment for the	purpose	of changing	its register	red
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was auth	norized by	the corpor	ration's board of	directors. I h	ereby accep	ot the app	ointment as	registered	i
SIGNATURE		Matthew	Zifro	ny			6/	10/99)		
	Signature, typed or printed name of registers. agent a			nt signature re	equired when reinstating						
12.	OFFICERS AND		13.		ADDITI	ONS/CHAN	GES TO OF	FICERS	AND DIREC	TORS IN 1	12
ſ	D	☐ DELETE	1.1 TITLE	}					XX hang	ge □ Ad	dition
ſ	D Steven Barry	☐ DELETE	1.2 NAME						XXhang	ge □Ad	ddition
IAME (~	☐ DELETE	1.2 NAME	ADDRESS 4	400 Juno 1	Largo I	rive		XX hang	ge □Ad	ddition
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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 607, 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.

Ingrid Bachelor
To Signing Officer or Director

6/10/99

(954) 525-7500

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