NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N98000005324

SHINING LIGHT CHURCH OF GOD IN CHRIST, INC.

Principal Place of Business 1106 - 71ST STREET EAST RUBONIA FL 34221

Mailing Address

1106 - 71ST STREET EAST RUBONIA FL 34221

## **FILED** Apr 08, 1999 8:00 am § Secretary of State

04-08-1999 90018 049 \*\*\*\*70.00



— ·	Place of Business 2a. Mailing Address				3. Date Incorporated or Qualified 09/17/1998			
21		26		·- ·-	4. FEI Number	Apr	lied For	
					65-0866764		Applicable	
22 City 8 Ct-4						\$8.75 A		
City & State City & State					5. Certificate of Status Desired	Fee Rec	<b>I</b>	
Zip	Country Zip Co				6. Election Campaign Financing	\$5.00 1	May Be	
24	25 29 30			Trust Fund Contribution Added to Fees			Fees	
Name and Address of Current Registered Agent					10. Name and Address of New Regis	ered Agent		
			81	Name				
WATKINS, GLORIA				82 Street Address (P.O. Box Number is Not Acceptable)				
239 - 39TH STREET SOUTH				Street Ad	idress (P.O. Box Number is Not Acceptable)			
ST. PETERSBURG FL 33711						1 1 2		
Marie Commission of the Commission				City		FL 85 Zip C	ode	
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	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Agen	it signature requ		ATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	DP	☐ DELETE	1,1 TITLE			☐ Change	☐ Addition	
NAME:	WATKINS, ROOSEVELT		1.2 NAME					
STREET ADORESS	239 39TH ST. SOUTH 14		1.3 STREET	ADDRESS				
CITY-ST-ZIP	ST. PETERSBURG FL 33711		1.4 CITY-S	T-ZIP				
TITLE			2.1 TITLE			Change	☐ Addition	
NAME	HENDRIEX, LOLA		2.2 NAME					
STREET ADDRESS	, ·		2.3 STREET	ADDRESS	a same			
CITY-ST-ZIP	RUBONIA FL 34221	,	2. 4 CITY-S	T-ZIP				
TITLE			3.1 TITLE			☐ Change	☐ Addition	
NAME	MURRELL.		3.2 NAME				1	
STREET ADDRESS	1411 71ST STREET EAST		3.3 STREET	FADDRESS				
CITY-ST-ZIP	RUBONIA FL 34221		3.4. CITY-S	T-ZIP				
TITLE	D	☐ DELETÉ	4.1 TITLE			Change	Addition	
NAME ,	REMBERT, AGNES		4. 2 NAME					
STREET ADDRESS	1020 72ND COURT EAST		4.3 STREET	F ADDRESS				
CITY-ST-ZIP	RUBONIA FL 34221		4.4 CITY-S	T-ZIP				
TITLE	D	☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME	SIMMONS, EDDIE		5.2 NAME					
STREET ADDRESS	1602 PRESCOTT ST. SOUTH		5.3 STREET	T ADDRESS			1	
CITY-ST-ZIP	RUBONIA FL 34221		5.4 CITY-S	T-ZIP				
TITLE .			6.1 TITLE		S	☐ Change	★ Addition	
NAME	MURRELL, GRACIE		6.2 NAME		BLOUNT, HELEN		}	
STREET ADDRESS	7715 118TH AVENUE EAST		6.3 STREE	I	2401 LYNN LAKE CIRCLE #6	3		
STREET PEDITESS	PARRIO FI GAME		SACITY.S		CT DETERCRIBE FI 3371			

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:

April 1, 1999

(727) 327-5518