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FILED

Feb 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P36298 (8)

1. Corporation Name

CHURCH OF GOD, INC.

Principal Place of Business

2490 KEITH STREET N.W.  
CLEVELAND TN 37311-1309

Mailing Address

3736 CRAGMONT DRIVE  
TAMPA FL 33619-1384  
US3. Date Incorporated or Qualified  
11/14/19913a. Date of Last Report  
07/31/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

Country

4. FEI Number

59-0766968

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐

Yes

☒

No

## 9. Name and Address of Current Registered Agent

ANGERER, ROBERT J.  
6341 BLOUNTSTOWN HIGHWAY  
TALLAHASSEE FL 32304

## 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 PCD  
NAME ATKINSON, WALTER  
STREET ADDRESS 2490 KEITH STREET N.W.  
CITY-ST-ZIP CLEVELAND TN ☒ DELETETITLE STD  
NAME MCGUIRE, G DENNIS  
STREET ADDRESS 2490 KEITH STREET N.W.  
CITY-ST-ZIP CLEVELAND TN ☐ DELETETITLE D  
NAME HUGHES, RAY H.  
STREET ADDRESS 2490 KEITH STREET N.W.  
CITY-ST-ZIP CLEVELAND TN ☒ DELETETITLE D  
NAME FISHER, ROBERT E.  
STREET ADDRESS 2490 KEITH STREET N.W.  
CITY-ST-ZIP CLEVELAND TN ☒ DELETETITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☒ Addition  
1.2 NAME Paul Walker  
1.3 STREET ADDRESS 2490 Keith Street, NW  
1.4 CITY-ST-ZIP Cleveland TN 373202.1 TITLE D ☒ Change ☐ Addition  
2.2 NAME Dennis McGuire  
2.3 STREET ADDRESS 2490 Keith Street NW  
2.4 CITY-ST-ZIP Cleveland TN 373203.1 TITLE V ☐ Change ☒ Addition  
3.2 NAME R. Lamar Vest  
3.3 STREET ADDRESS 2490 Keith Street NW  
3.4 CITY-ST-ZIP Cleveland TN 373204.1 TITLE D ☐ Change ☒ Addition  
4.2 NAME T.L. Lowery  
4.3 STREET ADDRESS 2490 Keith Street NW  
4.4 CITY-ST-ZIP Cleveland TN 373205.1 TITLE S/T ☐ Change ☒ Addition  
5.2 NAME Bill F. Sheeks  
5.3 STREET ADDRESS 2490 Keith Street NW  
5.4 CITY-ST-ZIP Cleveland TN 373206.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 *Barbara Stentz* Barbara Stentz, State Treasurer 2/20/97 813/620-3366

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0048524

CR2E037 (9/96)