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FILED

Feb 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 707391 (9)

1. Corporation Name

CHURCH OF ONTOLOGY, INC.



Principal Place of Business

Mailing Address

3327 LANNIE ROAD  
JACKSONVILLE FL 322183327 LANNIE ROAD  
JACKSONVILLE FL 32218-79023. Date Incorporated or Qualified  
06/04/19643a. Date of Last Report  
02/14/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
59-1082450Applied For  
Not Applicable5. 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

## 10. Name and Address of New Registered Agent

SMITH, PATRICIA  
3327 LANNIE ROAD  
JACKSONVILLE FL 32218

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

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

TITLE PT ☐ DELETE  
NAME ROACH, DIANE  
STREET ADDRESS 3327 LANNIE RD.  
CITY - ST - ZIP JACKSONVILLE FLTITLE VD ☒ DELETE  
NAME CALVIT, H. LOUISE  
STREET ADDRESS RT.1, BOX 146-A  
CITY - ST - ZIP HOT SPRINGS NCTITLE D ☐ DELETE  
NAME GATES, MERLYN  
STREET ADDRESS 5000 SAN JOSE BLVD #211  
CITY - ST - ZIP JACKSONVILLE FLTITLE S ☐ DELETE  
NAME YANTISS, MARY  
STREET ADDRESS RT 1 BOX 146A  
CITY - ST - ZIP HOT SPRINGS NCTITLE DAS ☐ DELETE  
NAME SMITH, PATRICIA  
STREET ADDRESS 3327 LANNIE ROAD  
CITY - ST - ZIP JACKSONVILLE FLTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP3.1 TITLE ☒ Change ☒ Addition  
3.2 NAME VD Merlyn Gates  
3.3 STREET ADDRESS 1595 Fruit Cove Woods Dr  
3.4 CITY - ST - ZIP Jax, FL 322594.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP6.1 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: Diane Roach (Diane Roach) 1-10-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #0008807

CR2E037 (9/96)