FILED FILE NOW: FILING FEE IS \$61.25 May 08 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3) 760471 BEVERLY HILLS CHURCH OF GOD, INC. Principal Place of Business Mailing Address % JOHNNIE L. HOLDER 8981 CARBONDALE 9113 RIDGE BLVD 3. Date Incorporated or Qualified JACKSONVILLE FL 32209 10/16/1981 JACKSONVILLE FL 32208 4. FEI Number Applied For 59-2788049 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? No. ☐ Yes 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Nama CLEVELAND, RICHARD H Street Address (P.O. Box Number is Not Acceptable) 9113 RIDGE BLVD 83 JACKSONVILLE FL 32208 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition HOLDER, JOHNNIE L NAME 1.2 NAME 8981 CARBONDALE DR. E. STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition 2.1 TITLE TITLE THOMAS, NATHANIEL R 2.2 NAME NAME STREET ADDRESS 816 BULLS BAY RD 2.3 STREET ADDRESS JACKSONVILLE, FL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE TITLE BRADFORD, CARL 3.2 NAME NAME 8819 COMPHOR DR. STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE, FL 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE NAME SPANN, WILLIE 4. 2 NAME 2573 MINOSA CIRCLE STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE, FL 00000 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE ALEXANDER, LINCOLN B. NAME 5.2 NAME 11626 BRIDGES RD. STREET ADDRESS **5.3 STREET ADDRESS** JACKSONVILLE FL 32218 CITY - ST - ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 I TITLE Change Addition

14. Thereby certify that the Information supplied with this filling 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:

8.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

HENRY, BOBBY

5111 DOSTIE DR SO

JACKSONVILLE FL

NALAF

STREET ADDRESS

CITY-ST-ZIP