

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Myrland  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 JAN 27 AM 11:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **820975** (1)

1. Corporation Name

**CHURCH OF THE LIVING GOD THE PILLAR AND GROUND O  
F THE TRUTH WHICH HE PURCHASED WITH HIS OWN BLOO**

Principal Place of Business 3325 NORTH RUCKLE STREET INDIANAPOLIS IN 46205-3839	Mailing Address 3325 NORTH RUCKLE STREET INDIANAPOLIS IN 46205-3839
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DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified <b>12/07/1967</b>	3a. Date of Last Report <b>03/18/1994</b>
4. FEI Number <b>35-1132342</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$6.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	<b>\$68.75 Supplemental Fee Not Required</b>
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**TATE, BISHOP ZETTIE**  
**178 S.W. 6TH ST.**  
**DEERFIELD BEACH FL**

10. Name and Address of New Registered Agent

81 Name **BISHOP EUNICE TREADWAY**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1178 S.W. 6TH STREET**  
83 **Bishop Eunice Treadway**  
84 City **DEERFIELD BEACH FL** 85 Zip Code **33444**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Eunice Treadway* DATE Jan. 18 1995  
Signature typed or printed name of registered agent and the 4 applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MANNING, NAOMI A.</b> <b>1013 HIGH DRIVE</b> <b>CARMEL IN</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>MOZEE, KEZIA</b> <b>3325 N. RUCKLE</b> <b>INDIANAPOLIS IN</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HOLMES, ERNEST</b> <b>721 REGINA COURT</b> <b>OWENSBORO KY</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MOORE, FAYE</b> <b>48 AVERY STREET</b> <b>MT. CLEMENS MI</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WHITE, WAYNE</b> <b>19790 W. NINE MILE RD</b> <b>SOUTHFIELD MI</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SIMMS, HANANIAH</b> <b>25 RUTGERS DR</b> <b>DELTRAN NJ</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>00000 1334930</b> <b>-02/01/95--01037--007</b> <b>*****70.00</b>
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>BOARD OF DIRECTOR</b> <b>FLOYD TURLEY</b> <b>DAYTON, OHIO</b> <b>3923 D CORNELL WOODS DR WEST</b>
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>1/27</b>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Kezia Moze* DATE 1-18-95 317 924-9981  
Signature and typed or printed name of signing officer or director (Date) (Phone #)