FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # N31687 (9)

1. Corporation Name

SKILLS APPLIED FOR EVANGELISM, INC.

Principal Place of Business

1216 GOLFVIEW DR.
%VIRGINIA L. DUGAN (PO BX 4107. SD 32121
DAYTONA BEACH FL 32114

Mailing Address

1216 GOLFVIEW DR.
%VIRGINIA L. DUGAN (PO BX 4107. SD 32121
DAYTONA BEACH FL 32114

3. Date Incorporated or Qualified: 04/10/1989

3a. Date of Last Report: 01/30/1995

4. FEI Number: 59-2951557 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt #, etc
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip
29
Country
30

9. **Name and Address of Current Registered Agent**

DUGAN, VIRGINIA L.
1216 GOLFVIEW DR.
DAYTONA BEACH FL 32114

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
NOTE: Registered Agent signature required when reinstating
DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	PRINSTON, JEROME	
STREET ADDRESS	1216 GOLFVIEW DR	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	☐ DELETE
NAME	VILARSON, SERGE	
STREET ADDRESS	1216 GOLFVIEW DR.	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	PD	☐ DELETE
NAME	JONES, CHARLES R.	
STREET ADDRESS	616 S LUPINE COURT	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	SD	☐ DELETE
NAME	JONES, PATRICIA	
STREET ADDRESS	616 S. LUPINE COURT	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☐ DELETE
NAME	ORLOSKY, DONALD	
STREET ADDRESS	17151 BAY AVENUE	
CITY-ST-ZIP	NONTVERDE FL	
TITLE	MD	☐ DELETE
NAME	RONK, PAUL	
STREET ADDRESS	1215 GOLFVIEW DRIVE	
CITY-ST-ZIP	DAYTONA BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Donald V Dugan 1/18/96 904-255-6960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

CR2E037 (12/95)