## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61,25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Sep 19 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

NAME

STREET ADDRESS

CITY-ST-ZIP

N38633

(6)

THE CORNERSTONE MINISTRIES OF HILLIARD, INC.

Principal Place of Business Mailing Address % W. C. VANZANT % W. C. VANZANT 312 ORANGE ST., P.O. 1107 312 ORANGE ST., P.O. 1107 DO NOT WRITE IN THIS SPACE HILLIARD FL 32046 HILLIARD FL 32046 3. Date Incorporated or Qualified 3a. Date of Last Report 06/18/1990 07/26/1996 4. FEI Number Applied For 59-3028140 21 Not Applicable \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible IVASSAK Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name VANZANT, W. C. 82 Street Address (P.O. Box Number is Not Acceptable) 312 ORANGE ST. 83 HILLIARD FL 32046 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. C. Can ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE TITLE 1.1 TITLE Change **NETTLES, ROBERTA-HALL** NAME 1.2 NAME STREET ADDRESS STATE RT. 121 1.3 STREET ADDRESS HILLARD FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Addition TITLE LEE TERESE NAME 2.2 NAME 106 PADGETT ST. STREET ADDRESS 2.3 STREET ADDRESS **FOLKSTON GA 31537** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETÉ TITLE 3.1 TITLE VANZANT, BARBARA NAME 3.2 NAME 312 ORANGE STREET 3.3 STREET ADDRESS STREET ADDRESS 32011 HILLIARD FL 32046 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change Addition TITLE VANZANT, W.C. NAME 4. 2 NAME 312 Orange Street 4.3 STREET ADDRESS STREET ADDRESS HILLIARD FL 32046 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE \_\_\_ Addition TITLE 5.1 TITLE ☐ Change NAME BAGBY, ARDYTHE W 5.2 NAME ROUTE 3, BOX 193 STREET ADDRESS 5.3 STREET ADDRESS HILLIARD FL 32046 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

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. 904

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP