SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 AUG -7 AM 10:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **N48470** **(1)**

1. Corporation Name
FORT WALTON BEACH KOREAN COMMUNITY CHURCH (P.C.A.), INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
136 BEAL PARKWAY FORT WALTON BEACH FL 32548	202 TEXAS STREET FORT WALTON BEACH FL 32548

3. Date Incorporated or Qualified: 04/17/1992
3a. Date of Last Report: 10/27/1994
4. FEI Number: 59-3124292 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	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

NEWMAN, RAYMOND F JR
150 EGLIN PARKWAY NE
FORT WALTON BEACH FL 32548

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	JEA, JOSHUA SH	12 NAME	
STREET ADDRESS	202 TEXAS ST.	13 STREET ADDRESS	
CITY-ST-ZIP	FT. WALTON BEACH FL 32548	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☒ Addition
NAME	~~CARTER, KYONG~~	22 NAME	D In Suk Schoffer
STREET ADDRESS	~~574 E. TIMBERLAKE~~	23 STREET ADDRESS	218 Westview
CITY-ST-ZIP	~~MARY ESTHER FL 32569~~	24 CITY-ST-ZIP	Crestview Fl. 32536
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	EMMI, TAE CHA	32 NAME	
STREET ADDRESS	701 BRIAN CIRCLE	33 STREET ADDRESS	
CITY-ST-ZIP	MARY ESTHER FL 32569	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	HENDRICK, SUE	42 NAME	
STREET ADDRESS	425 S. SART AVE.	43 STREET ADDRESS	
CITY-ST-ZIP	PANAMA CITY FL 32404	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☒ Addition
NAME		52 NAME	D Hui Cha Parris
STREET ADDRESS		53 STREET ADDRESS	1699 HWY 98 W #301
CITY-ST-ZIP		54 CITY-ST-ZIP	Mary Esther Fl. 32569
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E037 (3/95)

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)(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 addition.

SIGNATURE: Joshua SH JEA Joshua SH JEA Aug/2 95 (904) 244-5770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0016555