

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUN 21 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N94000000571 (9)**

1. Corporation Name

**SAINTS ON THE MOVE FOR CHRIST EVANGELISTIC MINIS
TRY, INCORPORATED**

Principal Place of Business

Mailing Address

17325 NW 27TH AVE
SUITE 100
MIAMI FL 33054

17325 NW 27TH AVE
SUITE 100
MIAMI FL 33054

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **01/28/1994** 3a. Date of Last Report **N/A**
4. FEI Number **65-0491594** Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 ~~17325 NW 27th Avenue~~

26 ~~17325 NW 27th Avenue~~

22 Suite 100

27 Suite 100

City & State

City & State

23 Miami, FL 33054

28 Miami, FL 33054

24 33054 **25** U.S.A

29 33054 **30** U.S.A

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 **\$68.75 Supplemental Fee Not Required**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEWART, GERALD B
505 N LIBERTY ST
JACKSONVILLE FL 32202**

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 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, TRACY B	1.2 NAME	
STREET ADDRESS	1011 DIXON ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL 32205	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDS, SARA	2.2 NAME	800001520578
STREET ADDRESS	1314 NW 9TH TER	2.3 STREET ADDRESS	-06/22/95--01050--003
CITY - ST - ZIP	FT LAUDERDALE FL 33311	2.4 CITY - ST - ZIP	*****68.75 *****68.75
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER, MICHAEL	3.2 NAME	
STREET ADDRESS	1188 N STATEROAD 7	3.3 STREET ADDRESS	
CITY - ST - ZIP	LAUDERDALE FL 33313	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FAIRCLOUGH, SHARON	4.2 NAME	
STREET ADDRESS	2807 HICKORY CIR	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIMS FL 32754	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER, PAMELA	5.2 NAME	
STREET ADDRESS	1188 N STATEROAD 7	5.3 STREET ADDRESS	
CITY - ST - ZIP	LAUDERHILL FL 33313	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(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: *Sharon Fairclough* Sharon Fairclough **5/5/95** (305) 626-5788