٠.	FILE	NQW:	FIL	ING	FEE	IS	\$61	.25
	NPROFIT			A CO	FL	ORIDA	DEPAR	TMENT

CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name

SUWAN	INEE RIVER CHURCH OF I	HE NAZAHENE, INC						
Principal Place	of Business	Mailing Address		t idbitt ignet eradd tratt ebang ereib.	**** = ***** ***** ***** ***** ***** ***** ****			
ROUTE 1. BO WHITE SPRIN		ROUTE 1. BOX 4815 WHITE SPRINGS FL 3	2096			=		
				3. Date Incorporated or Qualified 12/04/1967	3a. Date of Last Report 05/01/1995			
Principal Place of Business		2a. Mailing Address 26		4. FEI Number Applier 59-3192960 Not Ap				
Suite, Apt. #	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition Fee Required			
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S \$5.00 May B Added to Fees	s		
Zip	Country 25	Zip 29	Country 30	Tionad Statutes =]Yes □No	! ,		
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New R	egistered Agent			
RT 1, BC	RS:REXX (Clem, Fred DX 4815 C-137 SPRINGS FL 32096	Rev.	81 Name 82 Street A 83 84 City	ddress (P.O. Box Number is Not Acceptab	FL 85 Zip Code			
11. Pursuant t or register familiar wi SIGNATURE	red agent, or both, in the State of Florid th, and accept the obligations of, Secti	tia. Such change was author ion 617.0503, Florida Statute — Mattie Fout	es.	poration submits this statement for the pur poard of directors, i hereby accept the app Fred Clem Pas to	pose of changing its registered ointment as registered agent. I 5/1/96	am		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	IÇERS AND DIRECTORS IN 12	2		
TIFLE	D	⊠ DELETE	1 1 TITLE	D Norgan, Durwood	Change X Add	dition		
NAME	ROUCH, NADA		1.2 NAME	Rt. 1 Box 170				
STREET ADDRESS	RT 1, BOX 5600 NA		1.3 STREET ADDRESS	Jasper, F1. 32052				
CITY-ST-ZIP	WHITE SPRINGS FL	FROGER	1.4 CITY - ST - ZIP		Change K Ad	Idition		
TITLE	D	™ DELETE	2 1 TITLE	O Morgan, Linda	La Grid ige (A) Au	GINO!		
NAME	SMITH, JIM		22 NAME 23 STREET ADDRESS	Rt. 1 Box 170				
STREET ADDRESS	P.O. BOX 657 N/A WHITE SPRINGS FL 32096		2 3 STHEET ADDRESS	Jasper, F1. 32052				
CITY-ST-ZIP TITLE	PC	DELETE	3 1 TITLE	h	Change 🗶 Ad	ldition		
NAME	CLEM, FRED		3 2 NAME	Fouraker, Richard				
STREET ADDRESS	ROUTE 1, BOX 4815 N/A		3.3 STREET ADDRESS	Rt. 1 Box 5930	2006			
CITY - \$T - ZIP	WHITE SPRINGS FL	<u> </u>	34 CITY-ST-ZIP	White Springs, Fl 3		dalitie -		
TITLE	D	DELETE	4 1 TITLE	Mattie Fouraker,	Treas.	רסוזוטט		
NAME	FOURAKER, MARTHA		4. 2 NAME	Route 1, Box 593				
STREET ADDRESS	1,00.0		4.3 STREET ADDRESS	White Springs, F	L 32096			
CITY-ST-ZIP	WHITE SPRINGS, FL 00000	DELETE	4.4 CITY - ST - ZIP 5 1 TITLE		☐ Change ☐ Ad	ddijida 1		
TITLE	VD DEADCALL	["]nercie	5.2 NAME		~ 1 h			
NAME	FOURAKER, PEARSALL ROUTE 1, BOX 6550		5 3 STREET ADDRESS	700001 8 \$ -07/12/96016	31607′ M'	;		
STREET ADDRESS	WHITE SPRINGS, FL 00000		5 4 CITY-ST-ZIP	-07/12/9601(304027 / ₅₄	\mathcal{I}		
CITY-ST-ZIP TITLE	D	DELETE	61 TITLE	***61.25	☐ Change A Ac	ddition		
NAME	BURROWS, SHIRLEY	_	6 2 NAME		\mathcal{Y}			
STREET ADDRESS			6.3 STREET ADDRESS					
SINCEL ADDRESS	WHITE COOINGS EL 22006		6.4 CHY-ST-7IP					

CITY-SI-ZIP

WHITE SPRINGS FL 32096

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). Fiorida 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 property. Chapter of Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment of the corporation or the receiver or trustee empowered to execute this report as property. Chapter of Chapter of the corporation of th