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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

716296

(9)

HOWELL BRANCH FELLOWSHIP, INC.

FILED Apr 22 1997 8:00am Secretary of State



| Principal Pl | ace of Business | Mailing Address | | | | | iiii iigid (dird d | at ninii ninii ki | idil Kirit di | #11 01\$11 1E01 |
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| 7540 GRAND WINTER PAR | | 7540 GRAND AVE. WINTER PARK FL 32792-7339 | | | | | | | | |
| US | | US | | | 3. | Date Incorporated o 04/02/1969 | y Qualified | 3a. Date 04 | of Last R /29/198 | |
| 2. Principa 21 | Place of Business | 2e. Mailing Address 26 Suite, Apt. #, etc. | | | 4. | 4. FEI Number 59-1404353 | | | | oplied For ot Applicable |
| Suite, Ap | pt. #, etc. | | | | 5. | Certificate of Status Desired | | | | \$8.75 Additional Fee Required |
| City & State | | City & State | | | 6. | 6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution | | | | |
| Zıp | Country | Zip | - | ntry | 8. | This corporation has | | | | 199.032, |
| 4 | 25 | 29 | 30 | | | Florida Statutes Name and Address | | Yes 🔼 | | |
| | 9. Name and Address of Curre | ent Hegistered Agent | | 81 Nam | ···· | Mame and Address | OL MAN HAS | istered Agi | PILL | |
| | | | | O IVAII | 10 | | | | | |
| | , RICHARD A | | 82 Stre | et Address (P | P.O. Box Number is N | lot Acceptabl | e) | | | |
| 39 WEST PINE ST ORLANDO FL 32801-9611 | | | | 83 | | | | | | |
| UKLAI | NDO FL 32801-9611 | | i | 84 City | <u></u> | | | I | 85 Zip (| Code |
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| office o | int to the provisions of Sections 617.05 or registered agont, or both, in the Sta I am familiar with, and accept the obli | te of Florida. Such change v igations of, Section 617.0503 | vas authorize 3. Florida Stat | d by the c tutes. | orporation's t | coard of directors. I h | ereby accep | t the appoin | itment as | registered |
| | Æ | | | | lure required when | reinstaling) | | DATE | | , <u>.</u> |
| signatur | Signature, typed or printed name of registered a | | | | | reinstaling) ADDITIONS/CHANGE | ES TO OFFIC | | IRECTOR | RS IN 12 |
| SIGNATUR | Signature, typed or printed name of registered a | igent and title it applicable | (NOTE: Registere | d Agent signa | 10 | ADDITIONS/CHANGE | | ERS AND D | IRECTOR | |
| SIGNATUR 12. NILE | Signature, typed or printed name of registered a | ngent and title if applicable | (NOTE: Registere | d Agent signal | 10 | ADDITIONS/CHANGE | | ERS AND D | | |
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information indicated on this annual report or supplied with ruis ming goes 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 suppliemental 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 it changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-13- 77 407-671-808 Dete Deytime Phone # 0018480