

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # 747016

1. Corporation Name LOGOS, LIFE AND LIGHT FOUNDATION, INC.					1 176908 - 90121 - 45				
Principal Pta	ace of Business	Mailing Address							
98 OLD BARN TRAIL P O BOX 1732 P.O. BOX 1732 P.O. BOX 1732 ORMOND BEACH FL 32174 US P O BOX 1732 P.O. BOX 1732 US US									
	Place of Business OLD BARN TRAIL	2a. Mailing Address 26 P.O. BOX 17	 732		3. Date incorporated or Qualifed 05/02/1979				
Suite, Ap	ot. #, etc. OND BEACH, FL	Suite, Apt. #, etc. ORMOND BEAC	CH,	FL	4. FEI Number 59-1923399		ed For opplicable		
City & S	tate 74-8272 USA	City & State 32175-1732	US	SA	5. Certificate of Status Desired	\$8.75 Add Fee Requ			
Zip	Country 25	Zip 30	Country	•	Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F			
	9. Name and Address of Current	Registered Agent			Name and Address of New Registered	Agent			
98 OLD	R, JAMES R. BARN TRAIL ID BEACH FL 32174		81 82 83		Address (P.O. Box Number is Not Acceptable)				
			84] '	FL				
office of agent.	or registered agent, or both, in the State of I am familiar with, and accept the obligation	of Florida. Such change was autho	orized by	the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appo	f changing its re intment as regis	gistered tered		
SIGNATUR	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	istered Age	nt signatura re	equired when reinstating) DATE				
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS A				
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition Addition		

FILED Mar 05, 1999 8:00 am \$ Secretary of State

03-05-1999 90121 045 ****61.25

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Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE	Signature, typed or printed name of registered agent and title if applicat	le. (NOTE: Re	egistered Agent signature require	id when reinstating)	D	ATE				
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12										
TITLE	D	☐ DELETE	1,1 TITLE			☐ Change	☐ Addition			
NAME	FLOURNOY, FRANCES		1.2 NAME				Ì			
STREET ADORESS	P O BOX 5 N/A		1.3 STREET ADDRESS							
CITY-ST-ZIP	NEWINGTON GA 30446		1.4 CITY-ST-ZIP							
TITLE	VD	☐ DELETE	2.1 TITLE			Change	Addition			
NAME	BUSA, ANTONIO		2.2 NAME							
STREET ADDRESS	137 BEAU RIVAGE DR		2.3 STREET ADDRESS							
CITY-ST-ZIP	ORMOND BEACH, FL 00000 32176		2.4 CITY-ST-ZIP				_ <u></u>			
TITLE	PD	☐ DELETE	3.1 TITLE			Change	☐ Addition			
NAME	LAWYER, BEVERLY		3.2 NAME							
STREET ADDRESS	98 OLD BARN TRAIL		3.3 STREET ADDRESS							
CITY-ST-ZIP	ORMOND BEACH FL 32174		3.4. CITY-ST-ZIP							
TITLE	D	☐ DELETE	4.1 TITLE			. ☐ Change	Addition			
NAME	TAGLIENTE, FRANK		4. 2 NAME							
STREET ADDRESS	290 POLLARD ROAD		4.3 STREET ADDRESS							
CITY-ST-ZIP	NORTHBRIDGE MA 01534		4.4 CITY-ST-ZIP							
TITLE	D	□ DELETE	5.1 TITLE			☐ Change	Addition			
NAME	CARTER, REGINALD REV. &		5.2 NAME							
STREET ADDRESS	2230 RIVERBROOK COURT		5.3 STREET ADDRESS							
CITY-ST-ZIP	DECATUR GA 30035		5.4 CITY-ST-ZIP							
TITLE	S	DELETE	6.1 TITLE			☐ Change	Addition			
NAME	MC ROBERTS, DARLENE		6.2 NAME							
STREET ADDRESS	230 COVENTRY COURT		6.3 STREET ADDRESS							
CITY-ST-ZIP	ORMOND BCH. FL 32174		6.4 CITY-ST-ZIP							

14. I 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, with all other like empowered.

SIGNATURE:

火EQBeverly R. Lawyer

1/28/99 (904) 673-7612

Daytime Phone #

176908-9021-45 747016

1999 CORPORATION ANNUAL REPORT - SUPPLEMENT

Logos Life and Light Foundation, Inc. Document #747016

OFFICERS AND DIRECTORS (Continued)

T/D LAWYER, JAMES R. 98 OLD BARN TRAIL ORMOND BEACH, FL 32174-8272

JOHN SALMON 1935 JACKSON LANE DAYTONA BEACH, FL 32124