

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Charles B. McCreary
GOVERNOR
TALLAHASSEE, FLORIDA 32304

APPROVED
AND
FILED

DOCUMENT # 702673 (5)

MAY 13 AM 10:15

VENICE ASSEMBLY OF GOD INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

695 CENTER ROAD VENICE FL 34284		695 CENTER ROAD VENICE FL 34284		DO NOT WRITE IN THIS SPACE	
3. Date incorporated or qualified 07/05/1961		3a. Date of Last Report 03/02/1994			
4. File Number 59-2400467		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 ☐		\$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	
JORDAN, DENNIS 1049 DELACROIX CIRCLE WILLOW RUN NOKOMIS FL 34275				81 Name GARY A. Gray 82 Street Address (P.O. Box Number is Not Acceptable) 121 W. Ponoco Trail 83 84 City Nokomis FL 85 Zip Code 34275	
11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 <i>Gary A. Gray</i> 5/14/95					

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95	
1. TITLE P NAME JORDAN, DENNIS STREET ADDRESS WILLOW RUN CITY, ST, ZIP VENICE FL	1.1 TITLE Change ☒ Addition ☐ 1.2 NAME Gary A Gray 1.3 STREET ADDRESS 121 W. Ponoco Trail 1.4 CITY, ST, ZIP Nokomis, FL 34275	2. TITLE S NAME FORMAN, KENNETH STREET ADDRESS 3189 BRIANT CITY, ST, ZIP NORTH PORT FL	2.1 TITLE Change ☒ Addition ☐ 2.2 NAME Gerald Smith 2.3 STREET ADDRESS 587 Colgate Rd 2.4 CITY, ST, ZIP VENICE FL 34293
3. TITLE T NAME CAMPBELL, BOB STREET ADDRESS PO BOX 1117 NA CITY, ST, ZIP VENICE FL	3.1 TITLE Change ☐ Addition ☐ 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	4. TITLE D NAME CUADRO, GILBERT STREET ADDRESS 3450 ORANGE ROAD CITY, ST, ZIP VENICE FL	4.1 TITLE Change ☐ Addition ☐ 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP
5. TITLE D NAME KONA, GEORGE SR. STREET ADDRESS 2040 EDMONDSON ROAD CITY, ST, ZIP NOKOMIS FL	5.1 TITLE Change ☐ Addition ☐ 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	6. TITLE D NAME NORMAN, JACK STREET ADDRESS 938 DORAL LANE S. CITY, ST, ZIP VENICE FL	6.1 TITLE Change ☒ Addition ☐ 6.2 NAME Michael Dalton 6.3 STREET ADDRESS 405 FAUN Rd 6.4 CITY, ST, ZIP Venice, FL 34293

14. I, the undersigned, hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 135.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made on oath. That I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gary A. Gray* 5/14/95 497-5683

SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR