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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 704834

THE CHURCH OF THE LORD JESUS CHRIST OF THE APOST LES AND PROPHETS FAITH, INC.

Principal Place of Business 4952 ST AUGUSTINE RD TALLAHASSEE FL 32310

Mailing Address

3582 SUN DOWN ROAD TALLAHASSEE FL 32310

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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3 3 3 3 3 3 3 3 3 3		L Co. Martin Salara				B.4.1.		A			 _	
2. Principal F	Place of Business	2a. Mailing Address			3	. Date Inco	imporated or 1962	Quained				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		 -	4	FEI Num				A	pplied For	
22		27				59-329	0809				ot Applicable	
City & Sta	te ·	City & State			5	Certifcate	of Status D	esired	×		Additional equired	
Zīp	Country Zip Cou			y _	6	6. Election Campaign Financing \$5.00 May Be						
24	25 29 30 9. Name and Address of Current Registered Agent				Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent							
	3. Name and Address of Curren	t Registered Agent	81	Name		. Name ar	id Address	or New H	cegisterea	Agent	· · · · · · · · ·	
					realito							
BUTLER, JOHN L JR				82 Street Address (P.O. Box Number Is Not Acceptable)								
3582 SUN DOWN ROAD TALLAHASSEE FL 32310			83	 							,·	
IALLANA	33EE FL 323 U		-							log 7:-		
			84	City					FL	85 Zip	Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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												
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 617.0503, Florida Statutes.												
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered 12. OFFICERS AND DIRECTORS 13.					quired when	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					2DC IN 40	
TITLE	DTR OFFICERS AN	D DELETE	1.1 TITLE			ADDITION	SOUTHINGE	3 10 OF	LICEKS VI	Change	Addition	
NAME	JOHNSON, RAINEY	El Deceie		}		73	ימומות	n-2-	722		- 1	
STREET ADDRESS	4952 ST AUGUSTINE ROAD		1.2 NAME				0- 0-	1767.	/00 <u></u> 0	1029	ករក រ	
CITY-ST-ZIP	TALLAHASSEE FL 32311		1.4 CITY-ST-ZIP				*	※米米米	70.OO	*****	7ີດ ໄ	
TITLE	S			21 TITLE						☐ Change	Addition	
NAME	HUNT, WILLIE L 22		2.2 NAME	1							1	
STREET ADDRESS	4		2.3 STREET ADDRESS								Į	
CITY-ST-ZIP	TALLAHASSEE FL 32311		2.4 CITY-ST-ZIP								[
TITLE	T □ DELETE 3.1		3.1 TITLE				-, 11 ,			Change	☐ Addition	
NAME	PYE, IDA MAE		3.2 NAME									
STREET ADDRESS	1 1000 0 1 100 1 100 1 100 1 100 1		3.3 STREE	TADDRESS			•				j	
CITY-ST-ZIP	TALLAHASSEE FL 32311		3.4. CITY-	ȘŢ-ZIP				 _				
TILE	D D	☐ DELETE	4.1 TITLE	- 1						Change	Addition	
NAME	GILLMORE, RICKY P		4, 2 NAME	,								
STREET ADDRESS	RT 32, BOX 540			TADDRESS							•	
CITY-ST-ZIP	TALLAHASSEE FL 32311	☐ DELETE	4.4 CITY-S 5.1 TITLE	ii-ZiP						Change	Addition	
NAME	WILSON, JOAMES JR		5.1 NAME	ļ								
STREET ADDRESS	4318 WINDY PINE CT		5.3 STREE	TADDRESS								
CITY-ST-ZIP	TALLAHASSEE FL 32310	ł	5.4 CTTY-S	1							}	
TITLE	PD	DELETE	6.1 TITLE							Change	Addition	
NAME	BUTLER, JOHN L JR		6.2 NAME	1			٠			-	1	
STREET ADDRESS	3582 SUNDOWN RD		6.3 STREE	TADDRESS		フ :	$\int_{\mathcal{A}} \int_{\mathcal{A}} \int$	^^			Ì	
CITY-ST-ZIP	TALLAHASSEE FL 32310		6.4 CITY-S	ST-ZIP	J.	<u>></u> _ l	1/119	17]	

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 distance empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or of an attachage with an address, with all other like empowered.

SIGNATURE