SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1997

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

FILED
Sep 05 1997 8:00am
Secretary of State

DOCUMENT # 705881 (1)

1. Corporation Name
ST. JOHNS AVENUE CHURCH OF CHRIST, INC.

Principal Place of Business	Mailing Address
3521 ST. JOHNS AVE. PALATKA FL 32177-4021	3521 ST. JOHNS AVE. PALATKA FL 32177-4021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/10/1963
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 59-2402705 ☐ 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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ASHE, BILL
RT 3 BOX 150
EAST PALATKA FL 32031

10. Name and Address of New Registered Agent

81 Name: Andrew Ray McNeely
82 Street Address (P.O. Box Number is Not Acceptable): Rt 5 Box 6454
83: 952 Moody Rd
84 City: Palatka FL 85 Zip Code: 32177

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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Andrew Ray McNeely — Andrew Ray McNeely — 8/3/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	V	☐ DELETE	1.1 TITLE	C	☐ Change ☑ Addition
NAME	WIMBERLY, SAM		1.2 NAME	C.L. Overtand	
STREET ADDRESS	190 RODDY ROAD		1.3 STREET ADDRESS	158 Confederate Point Rd.	
CITY-ST-ZIP	PALATKA FL		1.4 CITY-ST-ZIP	Palatka, FL 32177	
TITLE	D	☒ DELETE	2.1 TITLE	D	☐ Change ☑ Addition
NAME	DUKES, HARRY		2.2 NAME	Gary Lott	
STREET ADDRESS	RT 5 BOX 517		2.3 STREET ADDRESS	2208 Cann St.	
CITY-ST-ZIP	PALATKA FL		2.4 CITY-ST-ZIP	Palatka, FL 32177	
TITLE	D	☐ DELETE	3.1 TITLE	T	☐ Change ☑ Addition
NAME	DUKES, HAROLD		3.2 NAME	Charles Overtand	
STREET ADDRESS	3017 TWIGG ST.		3.3 STREET ADDRESS	Rt 4 Box 335	
CITY-ST-ZIP	PALATKA FL		3.4 CITY-ST-ZIP	Palatka, FL 32177	
TITLE	SD	☒ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LAURENCE, ELDRIDGE		4.2 NAME		
STREET ADDRESS	STAR ROUTE 3, BOX 803		4.3 STREET ADDRESS		
CITY-ST-ZIP	SATSUMA FL		4.4 CITY-ST-ZIP		
TITLE	T	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ALRED, HOWARD		5.2 NAME		
STREET ADDRESS	2900 TWIGGS ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	PALATKA FL		5.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	MCNEELY, RAY		6.2 NAME		
STREET ADDRESS	RT 5 BOX 6454		6.3 STREET ADDRESS		
CITY-ST-ZIP	PALATKA FL		6.4 CITY-ST-ZIP		

CR2E037 (4/97)

14. I do 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.

SIGNATURE REQUIRED