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Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **705881** (1)
1. Corporation Name
ST. JOHNS AVENUE CHURCH OF CHRIST, INC.



Principal Place of Business 3521 ST. JOHNS AVE. PALATKA FL 32177-4021	Mailing Address 3521 ST. JOHNS AVE. PALATKA FL 32177-4021
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3. Date Incorporated or Qualified 07/10/1963
4. FEI Number 59-2402705
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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. Box 1371
City & State 23	City & State 28 PALATKA, FL 32178
Zip 24	Country 30 USA

9. Name and Address of Current Registered Agent MCNEELY, ANDREW R RT 5 BOX 6454 952 MOODY RD PALATKA FL 32177

10. Name and Address of New Registered Agent 81 Name WIMBERLY, SAM 82 Street Address (P.O. Box Number is Not Acceptable) 190 RODDY ROAD 83 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 *Sam Wimberly* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WIMBERLY, SAM 190 RODDY ROAD PALATKA FL ☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P WIMBERLY, SAM 190 RODDY ROAD PALATKA FL 32177 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C OVENTURF, C L 158 CONFEDERATE POINT RD PALATKA FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	V DUKES, HAROLD 3017 TWIGG ST. PALATKA, FL 32177 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUKES, HAROLD 3017 TWIGG ST. PALATKA FL ☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	T OVERTURF, CHARLES ROUTE 4 BOX 335 PALATKA FL 32177 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOTT, GARY 2208 CANN ST PALATKA FL ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	C OVERTURF, C L 158 CONFEDERATE POINT RD PALATKA FL 32177 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OVERTURF, CHARLES RT 4 BOX 335 PALATKA FL ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D LOTT, GARY 2208 CANN ST PALATKA FL ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCNEELY, RAY RT 5 BOX 6454 PALATKA FL ☒ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	D OVERTURF, STEVE RT 4 BOX 314 PALATKA FL 32177 ☒ Change ☐ Addition

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.

SIGNATURE: *Sam Wimberly* 3-1-98

CR2E037 (10/97)