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).

FILED
Aug 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # 706043 (7)

1. Corporation Name

DUNKLIN MEMORIAL CHURCH, INC.

Principal Place of Business	Mailing Address
3342 SW HOSANNAH LANE OKEECHOBEE FL 34974	3342 SW HOSANNAH LANE OKEECHOBEE FL 34974

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/15/1963	3a. Date of Last Report: 02/14/1996
4. FEI Number: 59-1083402	☐ 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	

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
EVANS,DONALD E 15350 SW OAK ST INDIANTOWN FL 33456	81 Name: EVANS, DONALD E. 82 Street Address (P.O. Box Number is Not Acceptable): 3505 Deer Run Trail 83 84 City: Okeechobee **FL** 85 Zip Code: 34974

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 ____________________
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	D ☐ DELETE	1.1 TITLE	VTD ☐ Change ☒ Addition
NAME	STRAYHORN, GUY	1.2 NAME	HUGH MURROW
STREET ADDRESS	123 RIVER RD.	1.3 STREET ADDRESS	23154 S.W. Hallelujah Way
CITY-ST-ZIP	FT. MYERS FL	1.4 CITY-ST-ZIP	Okeechobee, FL 34974
TITLE	~~VC~~ ☒ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	~~ADAMS, J W~~	2.2 NAME	
STREET ADDRESS	~~3342 SW HOSANNAH LN~~	2.3 STREET ADDRESS	
CITY-ST-ZIP	~~OKEECHOBEE FL~~	2.4 CITY-ST-ZIP	
TITLE	DC ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BEESON, FRED V.	3.2 NAME	
STREET ADDRESS	6126 WOODCREEK COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	3.4 CITY-ST-ZIP	
TITLE	ST ☐ DELETE	4.1 TITLE	S ☒ Change ☐ Addition
NAME	EVANS, LAURA MAYE	4.2 NAME	EVANS, LAURA MAYE
STREET ADDRESS	15350 SW OAK ST	4.3 STREET ADDRESS	3505 Deer Run Trail
CITY-ST-ZIP	INDIANTOWN FL	4.4 CITY-ST-ZIP	Okeechobee, FL 34974
TITLE	PD ☐ DELETE	5.1 TITLE	P.D ☒ Change ☐ Addition
NAME	EVANS, DONALD E	5.2 NAME	EVANS, DONALD E.
STREET ADDRESS	15350 SW OAK ST	5.3 STREET ADDRESS	3505 Deer Run Trail
CITY-ST-ZIP	INDIANTOWN FL	5.4 CITY-ST-ZIP	Okeechobee, FL 34974
TITLE	D ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	JOLICOEUR, JERRY	6.2 NAME	
STREET ADDRESS	2044 S.W. 19TH LN.	6.3 STREET ADDRESS	
CITY-ST-ZIP	OKEECHOBEE 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: SIGNATURE REQUIRED 8-18-97 (561) 597-3841