FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 713381 (2)

1. Corporation Name

E.L. KELLEY EVANGELISM FOR CHRIST, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
520 NW 103 ST MIAMI FL 33150 US	~~12740 N.E. 4TH AVENUE~~ ~~MIAMI FL 33161~~

3. Date Incorporated or Qualified: 09/27/1967
3a. Date of Last Report: 03/11/1994
4. FEI Number: 31-6067819 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21:
2a. Mailing Address — 26: P.O. Box 3201
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28: BRANDON, FL
Zip — 24:
Country — 25:
Zip — 29: 33509
Country — 30: USA

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

SMITH, JOHN T
~~12740 NE 4TH AVE~~ 1434 SHELL FLOWER Drive
~~MIAMI FL 33161~~ BRANDON, FL 33511

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 1434 SHELL FLOWER DRIVE
83
84 City: BRANDON FL 85 Zip Code: 33511

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PP ☑ Change ☐ Addition
NAME	SMITH, JOHN T	1.2 NAME	SMITH, JOHN T
STREET ADDRESS	~~12740 N.E. 4TH AVENUE~~	1.3 STREET ADDRESS	1434 SHELL FLOWER DRIVE
CITY-ST-ZIP	~~MIAMI FL~~	1.4 CITY-ST-ZIP	BRANDON, FL 33511
TITLE	SD	2.1 TITLE	SD ☑ Change ☐ Addition
NAME	DAVIS, JESSIE M	2.2 NAME	DAVIS, JESSIE M.
STREET ADDRESS	~~12740 N E 4TH AVE~~	2.3 STREET ADDRESS	13018 NE 6TH Ave. #210
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33161
TITLE	VTD	3.1 TITLE	VTD ☑ Change ☐ Addition
NAME	SMITH, FREDA Q	3.2 NAME	SMITH, FREDA Q.
STREET ADDRESS	~~12740 N.E. 4TH AVENUE~~	3.3 STREET ADDRESS	1434 SHELL FLOWER Drive
CITY-ST-ZIP	~~MIAMI FL~~	3.4 CITY-ST-ZIP	BRANDON, FL 33511
TITLE	D	4.1 TITLE	D ☑ Change ☐ Addition
NAME	MAYE, TELIA R	4.2 NAME	REV. R.A. BODEEN
STREET ADDRESS	~~12740 N E 4TH AVE~~	4.3 STREET ADDRESS	8152 CHEROKEE RD.
CITY-ST-ZIP	~~MIAMI FL~~	4.4 CITY-ST-ZIP	BARTOW, FL 33830
TITLE	D	5.1 TITLE	D ☑ Change ☐ Addition
NAME	BROWN, SHARON WHITEHE	5.2 NAME	BROWN, SHARON
STREET ADDRESS	~~12740 N.W. 4TH AVE REAR~~	5.3 STREET ADDRESS	12641 GREENS BAYOU DR
CITY-ST-ZIP	~~MIAMI FL~~	5.4 CITY-ST-ZIP	HOUSTON, TX 77015
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Rev John T. Smith REV. JOHN T. SMITH, PRES. 4-25-95 (813) 661-4954
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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