

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 717599 (5)
1. Corporation Name

WORLD WIDE CHURCH OF JESUS CHRIST, INC.



Principal Place of Business

Mailing Address

1748 NE 175 STREET
P.O. BOX 337
CITRA FL 32113

1748 NE 175 STREET
P.O. BOX 337
CITRA FL 32113

3. Date Incorporated or Qualified
11/21/1969

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23. City & State

27. City & State

24. Zip

25. Country

29. Zip

30. Country

4. FEI Number
05-0043952

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORLEY, HENRY
1748 NE 175 STREET
CITRA FL 32113

81. Name

Morley, Henry

82. Street Address (P.O. Box Number is Not Acceptable)

1748 NE 175 Street

83.

84. City

Citra

FL

85. Zip Code

32113

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

Ray Henry Morley
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME MORLEY, HENRY
STREET ADDRESS RT 4 BOX 160
CITY-ST-ZIP CITRA FL

TITLE D ☐ DELETE
NAME WILLIAMS, BONNIE FAYE
STREET ADDRESS RT 1 BOX 263
CITY-ST-ZIP HAWTHORNE FL

TITLE S ☐ DELETE
NAME BAKER, ANNIE RUTH
STREET ADDRESS RT 4 BOX 160
CITY-ST-ZIP CITRA FL

TITLE T ☐ DELETE
NAME NICHOLS, CHARLES
STREET ADDRESS RT 4 BOX 160
CITY-ST-ZIP CITRA FL

TITLE D ☒ DELETE
NAME NICHOLS, BETTY
STREET ADDRESS RT 4 BOX 160
CITY-ST-ZIP CITRA FL

TITLE D ☐ DELETE
NAME MORLEY, ALTAMESE
STREET ADDRESS RT 4 BOX 160
CITY-ST-ZIP CITRA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME Jackson, Ray Charles
5.3 STREET ADDRESS RT 4 BOX 160
5.4 CITY-ST-ZIP CITRA FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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)(k), 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:

Ray Henry Morley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-26-96

Daytime Phone #

352-595-2494

CR2E037 (12/95)