

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 21 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 719012

1. Corporation Name

FELL OWSHIP IN CHRIST EVANGELISTIC ASSN. INC.

Principal Place of Business

Mailing Address

284 East 46th Street
Jacksonville Fl. 32208

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/20/1970

3a. Date of Last Report

04/19/94

4. FEI Number

23-7069903

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

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

2. Principal Place of Business

2a. Mailing Address

21 284 E. 46th Street

26 same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Jacksonville Fl. 32208

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

Douval

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Marvin E. Batton
284 E. 46th Street
Jacksonville Fl. 32208

81 Name

same

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

83

84 City

FL

85 Zip Code

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

Marvin E. Batton

Marvin E. Batton

04/12/95

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 P/T
NAME Marvin E. Batton
STREET ADDRESS 284 E. 46th Street
CITY-ST-ZIP Jacksonville Fl. 32208

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

☐ Change ☐ Addition
700001464837
-04/26/95--01020--012
*****70.00 *****70.00

TITLE V/S
NAME Jewel P Batton
STREET ADDRESS 284 E. 46th. Street
CITY-ST-ZIP Jacksonville Fl. 32208

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

☐ Change ☐ Addition

TITLE V/D
NAME Mary Adkins
STREET ADDRESS 10303 Swarthmore Dr.
CITY-ST-ZIP Jacksonville Fl. 32218

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

☐ Change ☐ Addition

TITLE V/D
NAME Wynnette Griffith
STREET ADDRESS 410 Wengard Ave.
CITY-ST-ZIP Crestview Fl. 32536

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

☐ Change ☐ Addition

TITLE V/D
NAME Terry B. Batton
STREET ADDRESS 5411 Creek Indian Trail
CITY-ST-ZIP Douglasville Ga. 30135

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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)(b), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marvin E. Batton

Marvin E. Batton

04/12/95

904-3543167

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Telephone Number)