FILE NOW: FILING FEE IS \$61,25

NONPROFIT CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

725869

GREEN COVE SPGS FL 32043

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS (2)

GLORIOUS CHURCH OF JESUS CHRIST OF THE APOSTLES FAITH, INCORPORATED

Principal Place of Business Mailing Address 4085 PIER STATION HOAD EAST 4085 PIER STATION ROAD EAST GREEN COVE SPRINGS FL 32043 3. Date Incorporated or Qualified 03/20/1973 3a. Date of Last Report 07/29/1996 4. FEI Number APPLICABLE 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Green Cove 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 30 Florida Statutes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 TROUTMAN, R.C. 82 **4085 PIER STATION ROAD EAST** 83 **GREEN COVE SPRINGS FL 32043** 84 11. Pursuant to the provisions of Sections 617.050? 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. Lyped or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Evangelist Lois Cooks A Change 4083 Prevestation RdE. DELETE Decensed TITLE 1.1 TITLE TROUTMAN, R.C. 1.2 NAME NAME 4085 PIER STATION RD. E STREET ADDRESS 13 STREET ADDRESS Green Cove Spgp. 7l. 32043 **GREEN COVE SPGS FL** 1.4 OffY-ST-ZIP CITY-ST-ZIP LINDA THORNTON RAE DELETE Change TITLE 2.1 TITLE COOKS, LOIS A NAME 2.2 NAME Green Cove 5pgs, 71 32043 4085 PIER STATION RD. E. 2.3 STREET ADDRESS STREET ADDRESS GREEN COVE SPGS FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Abrom COOKS 4083 Pier Station RdE Change TITLE 3.1 TITLE MOORE, CATHERINE NAME 3.2 NAME 4085 PIER STATION RD. E. Green Cove Spgs 71. 34043 STREET ADDRESS 3.3 STREET ADDRESS

CITY-ST-21P 6.4 CITY - ST - ZIP 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 appress.

3.4. CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

DELETE

11/2/101

Change

Change

Change

Addition

Addition

☐ Addition

FILED

May 14 1997 8:00am

Secretary of State