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 APR 28 PM 7:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **729481** **(2)**

1. Corporation Name
WORD OF LIFE CHRISTIAN CHURCH, INC.

Principal Place of Business	Mailing Address
700 S. COURTENAY PKWY MERRITT ISL FL 32952	700 S. COURTENAY PKWY MERRITT ISL FL 32952

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/23/1974
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-2159446 ☐ 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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

TRUE DANIEL M
3930 NEWPORT ST
COCOA FL 32927

10. Name and Address of New Registered Agent

81 Name: DOBSON, JIMMY L.
82 Street Address (P.O. Box Number is Not Acceptable): 657 IROQUOIS ST
83
84 City: MERRITT ISLAND FL 85 Zip Code: 32952

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: Jimmy L. Dobson (Jimmy L. Dobson), Administrator — 21 April 1995
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	1.1 TITLE		☒ Change ☐ Addition
NAME	HOWALD, FRANK	1.2 NAME	DELETE	
STREET ADDRESS	4360 STILLWATERS DRIVE	1.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL	1.4 CITY-ST-ZIP		
TITLE	VP	2.1 TITLE	VP/D	☒ Change ☐ Addition
NAME	ELROD, ROBERT	2.2 NAME	ELROD, ROBERT W.	
STREET ADDRESS	978 NICKLAUS DR	2.3 STREET ADDRESS	978 NICKLAUS DR	
CITY-ST-ZIP	ROCKLEDGE FL	2.4 CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	SD	3.1 TITLE		☒ Change ☐ Addition
NAME	TRUE, DANIEL M	3.2 NAME	DELETE	
STREET ADDRESS	3930 NEWPORT ST	3.3 STREET ADDRESS		
CITY-ST-ZIP	COCOA FL	3.4 CITY-ST-ZIP		
TITLE	TD	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	CLENDINEN, CLAY	4.2 NAME	CLENDINEN, CLAYTON	
STREET ADDRESS	6844 COLUMBINE DRIVE	4.3 STREET ADDRESS	3084 SUNSET CT	
CITY-ST-ZIP	COCOA FL	4.4 CITY-ST-ZIP	COCOA FL 32922	
TITLE	PD	5.1 TITLE		☒ Change ☐ Addition
NAME	WELCH, NICHOLAS C	5.2 NAME		
STREET ADDRESS	480 OAKWOOD CT	5.3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL	5.4 CITY-ST-ZIP	32953	
TITLE		6.1 TITLE	S/D	☐ Change ☒ Addition
NAME		6.2 NAME	DOBSON, JIMMY L.	
STREET ADDRESS		6.3 STREET ADDRESS	657 IROQUOIS ST	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	MERRITT ISLAND FL 32952	

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. Nicholas C. Welch Pastor/President — 4-21-95 — 407-453-4537
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0694748