

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Feb 26 1997 8:00 am
Secretary of State

DOCUMENT # 731240 (8)
1. Corporation Name
WORD OF TRUTH MISSIONARY BAPTIST CHURCH, IN.



Principal Place of Business Mailing Address
7137 CISCO GARDEN RD. 7137 CISCO GARDEN RD.
JACKSONVILLE FL 32219 JACKSONVILLE FL 32219-2722

3. Date Incorporated or Qualified 11/26/1974 3a. Date of Last Report 02/05/1996
4. FEI Number 59-3030823 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt #, etc. 26 Suite, Apt #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 25 29 30

9. Name and Address of Current Registered Agent

SAUNDERS, L.H.
6611 BLANDING BLVD.
JACKSONVILLE FL 32244

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

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 SAUNDERS, L.H.
STREET ADDRESS 6611 BLANDING BLVD.
CITY-ST-ZIP JACKSONVILLE FL
TITLE VPD ☒ DELETE
NAME OQUINN, JACK
STREET ADDRESS 4392 MAGILL ROAD
CITY-ST-ZIP JACKSONVILLE FL
TITLE SD ☐ DELETE
NAME VILLARREAL, BETTY
STREET ADDRESS 9269 OLD PLANK ROAD
CITY-ST-ZIP JACKSONVILLE FL
TITLE T ☒ DELETE
NAME O'QUINN, ANN
STREET ADDRESS 4392 MAGILL ROAD
CITY-ST-ZIP JACKSONVILLE FL
TITLE D ☐ DELETE
NAME NORRIS, JUNE
STREET ADDRESS 5625 JAY ROAD
CITY-ST-ZIP JACKSONVILLE FL
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE S ☐ Change ☒ Addition
1.2 NAME Watson Dianne
1.3 STREET ADDRESS 9269 Old Plank Rd.
1.4 CITY-ST-ZIP Jacksonville, Fla.
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE T/D ☒ Change ☐ Addition
3.2 NAME Villarreal Betty
3.3 STREET ADDRESS 9269 Old Plank Rd.
3.4 CITY-ST-ZIP Jacksonville, Fla. 32220
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE VPD ☒ Change ☐ Addition
5.2 NAME Norris June
5.3 STREET ADDRESS 5625 Jay Road
5.4 CITY-ST-ZIP Jacksonville, Fla. 32219
6.1 TITLE 300002099943 ☐ Change ☐ Addition
6.2 NAME -02/27/97--01054--029
6.3 STREET ADDRESS ***61.25
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 address.

SIGNATURE: Betty Villarreal Betty Villarreal 2/18/97 904-781-5713
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E037 (9/96)