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FILED

May 05 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 733729 (8)

1. Corporation Name

WORD OF LIFE CHURCH, INC.

Principal Place of Business

Mailing Address

8855 SANCHEZ RD  
JACKSONVILLE FL 32217

PO BOX 23789  
JACKSONVILLE FL 32241-3799



2. Principal Place of Business

21 1629 TAYO LANE

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 JACKSONVILLE, FL

24 Zip

32223

Country

25 USA

27 City & State

28 Zip

29

Country

30

9. Name and Address of Current Registered Agent

MILLER, MARK  
1629 TAYO LANE  
JACKSONVILLE FL 32223

3. Date Incorporated or Qualified  
09/03/1975

3a. Date of Last Report  
03/18/1996

4. FEI Number  
51-0185511

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

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 VSD ☐ DELETE  
NAME MILLER, DOLORES  
STREET ADDRESS 1629 TAYO LANE  
CITY-ST-ZIP JACKSONVILLE, FL 00000

TITLE TD ☐ DELETE  
NAME BELAVITCH, JOAN  
STREET ADDRESS 8150 SUTTON PLACE EAST  
CITY-ST-ZIP JACKSONVILLE, FL 00000

TITLE PD ☒ DELETE  
NAME MILLER, MARY  
STREET ADDRESS 1629 TAYO LANE  
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 TD  
2.3 STREET ADDRESS BELAVITCH, JOAN  
2.4 CITY-ST-ZIP 4318 SPOON HOLLOW LN.  
JACKSONVILLE, FL. 32217

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 PD  
4.3 STREET ADDRESS MILLER, MARK  
4.4 CITY-ST-ZIP 1629 TAYO LANE  
JACKSONVILLE, FL. 32223

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

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 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.

CR2E037 (9/96)

(904)