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CORPORATION ANNUAL REPORT
1995

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

FILED
95 FEB 28 AM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 737769 (0)

1. Corporation Name
OPEN DOOR BAPTIST CHURCH OF GAINESVILLE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
601 NE 19TH ST GAINESVILLE FL 32601	P.O. BOX 809 GAINESVILLE FL 32602

3. Date Incorporated or Qualified: 01/10/1977
3a. Date of Last Report: 08/10/1994
4. FEI Number: 59-1724616 ☐ 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

JONES, SAMUAL, JR.
601 N.E. 19TH STREET
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name: JONES, TALMADGE
82 Street Address (P.O. Box Number is Not Acceptable): 601 N.E. 19th STREET
83 GAINESVILLE, FL. 32601
84 City: GAINESVILLE, FL 85 Zip Code: 32601

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: Talmadge Jones — Talmadge Jones — 2/19/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required if name is changed) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	VD	☒ Change ☐ Addition
NAME	JONES, SAMUEL JR.	1.2 NAME	SUMWASHE, RICHARD	
STREET ADDRESS	915 S.E. 19TH ST.	1.3 STREET ADDRESS	1023 NE. 24th ST.	
CITY-ST-ZIP	GAINESVILLE FL	1.4 CITY-ST-ZIP	GAINESVILLE FL 32601	
TITLE	TD	2.1 TITLE	SD	☐ Change ☒ Addition
NAME	JONES,DAVID E.	2.2 NAME	ANDREWS, RAMOTH	
STREET ADDRESS	1135 S.E. 12TH ST.	2.3 STREET ADDRESS	1440 SE. 24TH PLACE	
CITY-ST-ZIP	GAINESVILLE FL	2.4 CITY-ST-ZIP	GAINESVILLE, FL. 32641	
TITLE	VSD	3.1 TITLE		☐ Change ☐ Addition
NAME	SUMWASHE, RICHARD	3.2 NAME		
STREET ADDRESS	1023 NE 24 ST.	3.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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)(k), 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: RAMOTH ANDREWS JR. Ramoth Andrews 2/23/95 955-6704 ext111
SIGNATURE AND TYPED OR PRINTED NAME OF FLORIDA OFFICER OR DIRECTOR — Date — Daytime Phone #

0020100