SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 743510

 \cdot (0)

HOLY TARERNACIE INTERNATIONAL HOUSE OF PRAYER FO

R ALL MANKIND, INC.																					
Principal Place of Business 825 WRIGHT STREET THOMASVILLE GA 31782				N	Mailing Address						-	1 111		EAU DU PAI	81 6 11 8 1 1				11811	TH TITL	Mi
					825 WRIGHT STREET THOMASVILLE GA 31782								<u>7/197</u>		Qualifie	d	<u></u>	<u> </u>			
											4.	. FEI Nur 59-1	^{mber} 1 8459 4	18				}		<u>plied Fo</u> t Applic	
2. Prir	cipal P	lace of Busin	ness	28	. Mailing	Address					1.	Certifica			anlrad		7	\$8.		ddition	
21				26							J.,	Optunos		iaius D	OSIIOU					quired	
Suite, Apt. #, etc.				<u> </u>	Sulte, Apt. #, etc.						6.	Election		-	_	. ر	_		۸۵.		
22 City	& Stat	e		27	City & City						+_	Trust Fu					<u> </u>			Fees	
23				28	City & State						7.	. Is this n	onprofit	corpo	ration a	homed Ye		assoc No	dation	7	
Zip			Country		Zip				Country			This cor	nooratio	n owes	or has				er Inte	naible	
24			25	29			30					Persona						Yes		No	
		9. Name	and Address of C	urrent Regi	stered A	ent					10.	Name a	ind Add	dress c	f New	Regist	ered /	gent			
								81	Na	me											
		V, CHRIS						82	Str	eet Addre	ess (P	P.O. Box	Number	r is Not	Accep	table)			•		
	N.W. MI FL	65TH STRE	:E1					83												_	
MIN	MIFL																				1
								84	Cit	y							FL	85	Zip (ode	
Olli	UB U: 16	ahisimian ahe	ons of sections 617. ont, or both, in the S	state of Florid	Ia. Suçn ç	nange was a	utno⊓ze	O DY IT	amed he co	corporation	lion su 's boa	ubmits thi	is staten	nent for	the pu	mose o	ob ob	ging it nent a	s regis	tered	
age	nt. I ar	n familiar wit	h, and accept the o	obligations of,	, section 6	17.0503, Flo	rida Sta	itutes.		-				•	•	•	•				
SIGNA	TURE.	Signature, typed	or printed name of register	ed agent and title	if applicable.		OTE: Regis	Istered Ac	pent sig	natura rautan	red wher	ar, reinstating	3				TE				İ
SIGNA 12.	TURE.	Signature, typed	or printed name of register	ed agent and title		(N			gent eig	nature requir		en reinstating	<u> </u>	NGES	TO OF		TE S ANI	DIRE	CTO		2
	TURE.	Signature, typed				DELETE	13		gent eig	nature requir		en reinstating	<u> </u>	ANGES	TO OF			_		_	
12.	TURE.	D B ENJ AMIN	OFFICER				1.1	3.	gent eig	nature requir			<u> </u>	ANGES	TO OF			DIRE Cha		_	2 dition
12. TITLE		D BENJAMIN 825 WRIG	OFFICER N, REV. CHRIS HT STREET				13 1.1 1.2	3. 1 TITLE					<u> </u>	ANGES	TO OF			_		_	
12. TITLE NAME STREET A CITY-ST-2	DORESS	D B ENJ AMIN	OFFICER N, REV. CHRIS HT STREET			DELETE	1.3 1.1 1.2 1.3	3. 1 TITLE 2 NAME	ADDRI				<u> </u>	NGES	TO OF			_		_	
12. TITLE NAME STREET A CITY-ST-Z TITLE	DORESS	D BENJAMIN 825 WRIG THOMASV D	OFFICER N, REV. CHRIS HT STREET JLLE GA				1.1 1.2 1.3 1.4	3. 1 TITLE 2 NAME 3 STREET	ADDRI				<u> </u>	ANGES	TO OF			_	inge		
12. TITLE NAME STREET A CITY-ST-Z TITLE NAME	DORESS :	D BENJAMIN 825 WRIG THOMASY D MIXON, TI	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA			DELETE	1.3 1.1 1.2 1.3 1.4 2.1	3. 1 TITLE 2 NAME 3 STREET 1 CITY-ST	ADDRI				<u> </u>	ANGES	TO OF			Cha	inge		dition
12. TITLE NAME STREET A CITY-ST-Z TITLE NAME STREET A	DORESS IP Doress	D BENJAMIN 825 WRKG THOMASV D MIXON, TI 18200 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA I 5TH PLACE			DELETE	1.3 1.1 1.2 1.3 1.4 2.1 2.2	3. I TITLE I NAME I STREET I CITY-ST	ADDRI T-ZIP	ESS			<u> </u>	ANGES	TO OF			Cha	inge		dition
12. TITLE NAME STREET A CITY-ST-Z TITLE NAME STREET A CITY-ST-Z	DORESS IP Doress	D BENJAMIN 825 WRKG THOMASV D MIXON, TI 18200 NW CAROL CI	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA I 5TH PLACE			DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	3. 1 TITLE 2 NAME 3 STREET 1 TITLE 2 NAME 2 NAME 3 STREET	ADDRI I-ZIP	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge		dition
12. TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE	DORESS IP Doress	D BENJAMIN 825 WRKG THOMASV D MIXON, TI 18200 NW CAROL CI	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL			DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE	ADDRI I-ZIP	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge	Add	dition
12. TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME	DORESS IP DORESS IP	D BENJAMIN 825 WRKG THOMASV D MIXON, TI 18200 NM CAROL CI D BENJAMIN	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA I/ 5TH PLACE ITY FL I, CHRIS, III			DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 3 STREET 1 CITY-ST. 1 TITLE 2 NAME 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME	ADDRI I-ZIP ADDRI I-ZIP	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge	Add	dition
12. TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A	DORESS IP DORESS IP	D BENJAMIN 825 WRIGHTHOMASV D MIXON, TI 18200 NM CAROL CI D BENJAMIN 2602 ROD	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL MAN RD.			DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 6 STREET 6 CITY-ST. 1 TITLE 2 NAME 8 STREET 8 TITLE 8 NAME 8 STREET	ADDRI ADDRI ADDRI	ESS			<u> </u>	MGES	TO OF		S ANI	Cha	inge	Add	dition
12. TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME	DORESS IP DORESS IP	D BENJAMIN 825 WRIGHTHOMASV D MIXON, TI 18200 NM CAROL CI D BENJAMIN 2602 ROD HOLLYWO	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL MAN RD.			DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 3 STREET 1 CITY-ST. 1 TITLE 2 NAME 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME	ADDRI ADDRI ADDRI	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge inge	Add	dition
12. TITLE NAME STREETA CITY-ST-2 TITLE NAME STREETA CITY-ST-2 TITLE NAME STREETA CITY-ST-2 TITLE CITY-ST-2 TITLE CITY-ST-2 TITLE CITY-ST-2 TITLE CITY-ST-2 TITLE CITY-ST-2	DORESS IP DORESS IP	D BENJAMIN 825 WRIGHTHOMASV D MIXON, TI 18200 NM CAROL CI D BENJAMIN 2602 RODHOLLYWO	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD.			DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 6 TITLE 6 TITLE 6 TITLE	ADDRI ADDRI ADDRI	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge inge	Add	dition
12. TITLE NAME STREETA CITY-ST-2 TITLE NAME STREETA CITY-ST-2 TITLE NAME STREETA CITY-ST-2 TITLE NAME NAME	DORESS IP DORESS IP DORESS	D BENJAMIN 825 WRIG THOMASV D MIXON, TI 18200 NM CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY,	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE			DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 STREET 6 CITY-ST.	ADDRI ADDRI 1-ZIP ADDRI 1-ZIP	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge inge	Add	dition
12. TITLE NAME STREETA CITY-ST-2 TITLE NAME STREETA CITY-ST-2 TITLE NAME STREETA CITY-ST-2 TITLE NAME NAME	DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIGH THOMAS V D MIXON, TI 18200 NW CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY, 5210 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 2 NAME 6 STREET 7 CITY-ST. 1 TITLE 8 NAME 8 STREET 8 CITY-ST. 1 TITLE 8 NAME 8 NAME	ADDRI ADDRI ADDRI ADDRI	ESS			<u> </u>	ANGES	TO OF		S ANI	Cha	inge inge	Add	dition
12. TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A STREET A	DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIG THOMASV D MIXON, TI 18200 NM CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY,	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 1 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 5 NAME 6 STREET 6 STREET	ADDRI ADDRI ADDRI ADDRI	ESS			<u> </u>	ANGES	TO OF		C C	Che Che	inge inge	Add	altion altion itlen
12. TITLE NAME STREET A CITY-ST-2	DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIGH THOMAS V D MIXON, TI 18200 NW CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY, 5210 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 4 NAME 5 STREET 5 TITLE 5 NAME 6 STREET 6 CITY-ST. 6 CITY-ST. 6 CITY-ST.	ADDRI ADDRI ADDRI ADDRI	ESS			<u> </u>	ANGES	TO OF		C C	Cha	inge inge	Add	dition
12. TITLE NAME STREET A CITY-ST-2 TITLE	DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIGH THOMAS V D MIXON, TI 18200 NW CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY, 5210 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 5 TITLE 2 NAME 6 STREET 6 CITY-ST. 6 CITY-ST. 7 TITLE 7 NAME 7 TITLE 8 TITLE 8 TITLE 9 TITLE 9 TITLE 1 TITLE 1 TITLE 1 TITLE	ADDRI ADDRI ADDRI ADDRI ADDRI ADDRI	ESS ESS ESS			<u> </u>	ANGES	TO OF		C C	Che Che	inge inge	Add	altion altion itlen
12. TITLE NAME STREET A CITY-ST-Z TITLE NAME	DORESS IP DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIGH THOMAS V D MIXON, TI 18200 NW CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY, 5210 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 6.2 5.3	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 2 NAME 6 STREET 6 CITY-ST. 1 TITLE 7 NAME 7 STREET 7 CITY-ST. 1 TITLE 8 NAME 8 STREET 8 STREET 9 STREET 1 CITY-ST.	ADDRI	ESS ESS ESS			<u> </u>	ANGES	TO OF		C C	Che Che	inge inge	Add	Altion Altion itlen
12. TITLE NAME STREET A CITY-ST-Z TITLE	DORESS IP DORESS IP DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIGH THOMAS V D MIXON, TI 18200 NW CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY, 5210 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE DELETE	13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.4	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 2 NAME 5 STREET 7 CITY-ST. 1 TITLE 8 NAME 8 STREET 8 NAME 8 STREET	ADDRI	ESS ESS ESS			<u> </u>	ANGES	TO OF		C C	Che Che	nge nge	Add	Altion Altion itlen
12. TITLE NAME STREET A CITY-ST-Z TITLE NAME	DORESS IP DORESS IP DORESS IP DORESS IP	D BENJAMIN 825 WRIGH THOMAS V D MIXON, TI 18200 NW CAROL CI D BENJAMIN 2602 ROD HOLLYWO M MOBLEY, 5210 NW	OFFICER N, REV. CHRIS HT STREET ILLE GA HEODOTHIA / 5TH PLACE ITY FL I, CHRIS, III MAN RD. 1000 FL CHRISTINE 180TH TERR			DELETE DELETE DELETE DELETE	133 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 6.1	3. 1 TITLE 2 NAME 3 STREET 4 CITY-ST. 1 TITLE 2 NAME 5 STREET 1 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 2 NAME 5 STREET 6 CITY-ST. 1 TITLE 5 NAME 5 STREET 7 CITY-ST. 1 TITLE 6 NAME 7 STREET 7 CITY-ST. 1 CITY-ST.	ADDRI	ESS ESS ESS			<u> </u>	ANGES	TO OF		C C	Che Che	nge nge	Add	dition dition ition

14. I 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.

FILED

Jul 30 1998 8:00am

Secretary of State