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

FILED
95 MAR 30 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **769325** **(2)**

1. Corporation Name

FRIENDLY TEMPLE INDEPENDENT CHURCH OF GOD IN CHR IST, INC.

800001444788
-03/31/95--01043--018
DO NOT WRITE IN THIS SPACE ****130.00 ****130.00

Principal Place of Business	Mailing Address
2117 WEST 44TH STREET JACKSONVILLE FL 32209	424 W. 24TH ST. JACKSONVILLE FL 32206 US

3. Date Incorporated or Qualified: 07/12/1983
3a. Date of Last Report: 10/05/1994
4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
21	26		
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
23 City & State	28 City & State	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
24 Zip / 25 Country	29 Zip / 30 Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No	

9. Name and Address of Current Registered Agent

~~BRINSON, DANIEL~~
~~424 W. 24TH ST.~~
~~JACKSONVILLE FL 32206~~

10. Name and Address of New Registered Agent

81 Name: Brinson, Victoria
82 Street Address (P.O. Box Number is Not Acceptable): 424 W. 24th Street
83
84 City: Jacksonville FL 85 Zip Code: 32206

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: Victoria Brinson — Victoria Brinson — 3/21/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		i. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~PD~~	1.1 TITLE	President ☑ Change ☐ Addition
NAME	~~BRINSON, DANIEL REV.~~	1.2 NAME	Brinson, Victoria
STREET ADDRESS	~~424 W. 24TH ST.~~	1.3 STREET ADDRESS	424 W. 24th street
CITY-ST-ZIP	~~JACKSONVILLE FL 32206~~	1.4 CITY-ST-ZIP	Jacksonville, FL 32206
TITLE	VD	2.1 TITLE	E Director ☐ Change ☑ Addition
NAME	BRINSON, VICTORIA	2.2 NAME	Kelly, Valsie
STREET ADDRESS	424 W. 24TH ST.	2.3 STREET ADDRESS	1710 W. 13th street
CITY-ST-ZIP	JACKSONVILLE FL 32206	2.4 CITY-ST-ZIP	Jacksonville, FL 32209
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	CORBITT, CHARLES	3.2 NAME	
STREET ADDRESS	6775 GASPER CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	MERCER, BARBARA	4.2 NAME	
STREET ADDRESS	3312 GREEN ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32205	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	SIMMONS, HENRY	5.2 NAME	
STREET ADDRESS	1727 EAST 19TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	HARVEY, CASSANDRA	6.2 NAME	
STREET ADDRESS	1140 KEY DEIRA DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32218	6.4 CITY-ST-ZIP	K

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: X Victoria Brinson — 3/6/95 — (904) 354-1543
SIGNATURE AND TYPED OR PRINTED NAME OF DIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000601