FILE NOW: FILING FEE IS \$61.25					FILED				
NONPROFIT CORPORATION		FLORIDA DEPA			Mar ()91	998	8:(00an
ANNUAL REPORT			B. Morthand ary of State				ry of		
1998	A STATE OF	DIVISION OF	CORPOR			icia	I y OI	S	latt
DOCUMENT #	769495	(3)							
BACK TO THE FAITH	, INC.								
Principal Place of Business		ing Address						UFUI (911 91911 (991
524 EAST AVE. 524 EAST AVE. BROOKSVILLE FL 34801 BROOKSVILLE FL 34801					3. Date incorporated or Qualified 07/20/1983				
					4. FEI Number			_	plied For
2. Principal Place of Business	2a. N	Address			59-2871947 5. Certificate of Status D	osirod	\$8,		t Applicable
21 Suite, Apt. #, etc.	26 S	Suite, Apt. #, etc.			6. Election Campaign Fit		F	ee Re	quired Aav Be
22 City & State	27	City & State			Trust Fund Contributio	n –	Ad Ad	ded lo	Fees
23	28	-			7. Is this nonprofit corpo		Yes K No	clatior	ז ?
Zip Col 24 25	untry Z	(ip	30 Cour	ntry	8. This corporation owes Personal Property Tax				angibie 1 No
9. Name and Ad	dress of Current Register	red Agent		81 Name	10. Name and Address of				
JOHNSTON, JOSEPH E.,	JR.				dross (D.O. Pou Number le Net	Assessable	•		
			'	ez Street Aut	dress (P.O. Box Number is Not	Acceptable))		
29 SOUTH BROOKSVILLE	AVENUE		Ļ		······································				
29 South Brooksville Brooksville FL 33512	AVENUE			83		······································			
BROOKSVILLE FL 33512			-	64 City			FL 85	Zip C	
BROOKSVILLE FL 33512		1508, Florida Statu Such change was section 617.0503.	-	64 City	rporation submits this statemer ation's board of directors. I her	nt for the pu			
BROOKSVILLE FL 33512 11. Pursuant to the provisions of 3 office or registered agent, or b agent. I am familiar with, and SIGNATURE	Sections 617.0502 and 617. oth, in the State of Florida. accept the obligations of, S		tes, the ab authorized lorida Statu	84 City ove-named cor by the corpora rites.		it for the pu eby accept	rpose of chang the appointme		
BROOKSVILLE FL 33512 11. Pursuant to the provisions of S office or registered agent, or h agent. I am familiar with, and SIGNATURE Signeture, typed or printed 12.		pplicable. (NO ORS	tes, the ab authorized lorida Statu TE: Registered 13.	84 City ove-named cor by the corpora tes. Agent signature requ	rporation submits this statemer ation's board of directors. I her ured when reinstating) ADDITIONS/CHANGES		PL rpose of chang the appointme DATE RS AND DIREC	ing its nt as i	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of S office or registered agent, or h agent. I am familiar with, and SIGNATURE Signature, typed or printed 12. TIRLE PD	Sections 617.0502 and 617. both, in the State of Florida. accept the obligations of, S name of registered agent and title # a OFFICERS AND DIRECT(pplicable. (NO	tes, the ab authorized lorida Statu TE: Registered	84 City ove-named coi by the corpora ries. Agent signature requ	uired when reinstating)		PL pose of change the appointme	ing its nt as i	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of S office or registered agent, or t agent. I am familiar with, and SIGNATURE SIGNATURE 12. TITLE PD CARAWAY, W. 524 EAST AVE	Sections 617.0502 and 617 both, in the State of Fiorida. accept the obligations of, S name of registered agent and title if a OFFICERS AND DIRECTO C.	pplicable. (NO ORS	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NA	84 City ove-named coi by the corpora ries. Agent signature requ	uired when reinstating)		PL rpose of chang the appointme DATE RS AND DIREC	ing its nt as i	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of S office or registered agent, or t agent. I am familiar with, and SIGNATURE 12. TIRE PD CARAWAY, W. STREET ADDRESS CITY-ST-ZIP BROOKSVILLE	Sections 617.0502 and 617 both, in the State of Fiorida. accept the obligations of, S name of registered agent and title if a OFFICERS AND DIRECTO C.	pplicable. (NO ORS	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAF 1.3 STR 1.4 CIT	B4 City ove-named coi by the corpora- ries. Agent signature requires. EE AE IEET ADDRESS Y-ST-ZIP	uired when reinstating)		DATE	ing its nt as i CTORS	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of S office or registered agent, or t agent. I am familiar with, and SIGNATURE TITLE PD CARAWAY, W. STREET ADRESS CITY-ST-ZIP TITLE NAME CARAWAY, OP	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered agent and litie if a OFFICERS AND DIRECTO C. FL	pplicable (NO DRS DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITL 1.2 NAM 1.3 STR	B4 City ove-named corpora fes. Agent signature requires. LE AE EET ADDRESS Y-ST-ZIP LE	uired when reinstating)		PL rpose of chang the appointme DATE RS AND DIREC	ing its nt as i CTORS	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or tagent. I am familiar with, and SIGNATURE 12. TIRLE PD NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS STREET ADDRESS S24 EAST AVE SD CARAWAY, OP S24 EAST AVE	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered agent and litie if a OFFICERS AND DIRECTO C. FL	pplicable (NO DRS DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAF 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAA 2.3 STR	B4 City ove-named corby by the corpora- tes. Agent signature requires. Agent signature requires.	uired when reinstating)		DATE	ing its nt as i CTORS	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE SIGNATURE 12. TIRLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS BROOKSVILLE TITLE D	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL	pplicable (NO DRS DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAI 1.3 STR 1.4 CIT 2.1 TITU 2.2 NAI 2.3 STR 2.4 CIT 3.1 TITU	B4 City ove-named cor- by the corpora- ries. Agent signature requires. Agent signature signature requires. Agent signature signa	uired when reinstating)		DATE	Ing its nt as i CTORS ange	s registered registered S IN 12
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE SIGNATURE 12. TIRLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE SD NAME STREET ADDRESS GARAWAY, OP STREET ADDRESS DONSOVILLE TITLE NAME JOHNSOTN, JC	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR.	DPIICABLE ORS DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAN 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAN 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAN	B4 City ove-named corporates. Agent signature requires. Agent signature signature requires. Agent signature	uired when reinstating)		DATE	Ing its nt as i CTORS ange	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE PD CARAWAY, W. S24 EAST AVE BROOKSVILLE SIGNASS S24 EAST AVE BROOKSVILLE D NAME JOHNSOTN, JC STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS JOHNSOTN, JC STREET ADDRESS SOBROOKSVILLE	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO ORS DELETE DELETE	tes, the ab authorized lorida Statu 13. 1.1 Tifl 1.2 NAI 1.3 STR 1.4 CIT 2.1 Tifl 2.2 NAI 2.3 STR 2.4 CIT 3.1 Tifl 3.2 NAI 3.3 STR 3.4. CIT	B4 City ove-named corporates. Agent signature requires. Agent signature requires. Agent signature requires. Agent ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP	uired when reinstating)		Charge Charge	ing its nt as i CTORS ange	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS GARAWAY, OP STREET ADDRESS GONSVILLE TITLE NAME STREET ADDRESS GONSVILLE TITLE STREET ADDRESS GONSVILLE ONAME JOHNSOTN, JO STREET ADDRESS 29 SO. BROOM	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	DPIICABLE ORS DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAI 1.3 STR 1.4 CIT 2.1 TITI 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STR 3.4. CIT 4.1 TITI	B4 City ove-named corporates toy the corporates Agent signature requires EET ADDRESS Y-ST-ZIP EET ADDRESS Y-ST-ZIP EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E	uired when reinstating)		DATE	ing its nt as i CTORS ange	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and signature, typed or printed SIGNATURE STREET ADDRESS S24 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS STREET ADRESS SOBROOKSVILLE	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO ORS DELETE DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAI 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STR 3.4 CIT 4.1 TITI 4.2 NAI	B4 City ove-named corporates toy the corporates Agent signature requires EET ADDRESS Y-ST-ZIP EET ADDRESS Y-ST-ZIP EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E	uired when reinstating)		Charge Charge	ing its nt as i CTORS ange	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of soffice or registered agent, or agent. I am familiar with, and signature, typed or printed SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE SIGNATURE CARAWAY, W. STREET ADDRESS STREET ADRESS STREET ADRESS STREET ADRESS STREET ADRESS STREET ADRESS STREET ADRESS	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO ORS DELETE DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAI 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STR 2.4 CIT 3.1 TITI 3.2 NAI 3.3 STR 3.4 CIT 4.1 TITI 4.2 NAI 4.3 STR	B4 City ove-named coporates by the corporates rtes. Agent eignature requires LE AE LET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP)	uired when reinstating)		PL rpose of change the appointme DATE RS AND DIREC Cha Cha	ange Singe	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE 12. TIRLE PD NAME STREET ADDRESS CARAWAY, W. STREET ADDRESS CARAWAY, W. STREET ADDRESS CARAWAY, W. STREET ADDRESS CARAWAY, W. STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CITY-ST-ZIP TITLE NAME JOHNSOTN, JC STREET ADDRESS CITY-ST-ZIP BROOKSVILLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO DRS DELETE DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAI 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAI 2.3 STR 2.4 Cit 3.1 TiTIL 3.2 NAI 3.3 STR 3.4 Cit 4.1 TITIL 4.3 STR 4.4 Cit	B4 City ove-named coporates by the corporates rtes. Agent eignature requires LE AE LET ADDRESS Y-ST-ZIP LE AE EET ADDRESS Y-ST-ZIP E AE EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP) E	uired when reinstating)		Charge Charge	ange Singe	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE 12. TIRLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CITY-ST-ZIP TITLE NAME SOHNSOTN, JC STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME <t< td=""><td>Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.</td><td>ppicable. (NO DRS DELETE DELETE</td><td>tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAF 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAR 2.3 STR 2.4 CIT 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAI 4.3 STR 4.4 CIT 5.1 TITL 5.3 STR</td><td>B4 City Ove-named coid by the corporation Ides. Agent signature requires Agent signature requires Ides. Agent signature requires Ides. AE Ides. IET ADDRESS Ides. Y-ST-ZIP Ides. IE Ides. AE Ides. EET ADDRESS Ides. Y-ST-ZIP Ides. IE Ides. IE</td><td>uired when reinstating)</td><td></td><td>PL rpose of change the appointme DATE RS AND DIREC Cha Cha</td><td>ange Singe</td><td>s registered registered S IN 12 Addition</td></t<>	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO DRS DELETE DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAF 1.3 STR 1.4 CIT 2.1 TITI 2.2 NAR 2.3 STR 2.4 CIT 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAI 4.3 STR 4.4 CIT 5.1 TITL 5.3 STR	B4 City Ove-named coid by the corporation Ides. Agent signature requires Agent signature requires Ides. Agent signature requires Ides. AE Ides. IET ADDRESS Ides. Y-ST-ZIP Ides. IE Ides. AE Ides. EET ADDRESS Ides. Y-ST-ZIP Ides. IE	uired when reinstating)		PL rpose of change the appointme DATE RS AND DIREC Cha Cha	ange Singe	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE 12. TITLE NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CITY-ST-ZIP TITLE NAME JOHINSOTN, JC 29 SO. BROOK STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS </td <td>Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.</td> <td>ppicable. (NO DRS DELETE DELETE</td> <td>tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NA# 1.3 STR 1.4 CIT 2.1 TITI 2.2 NA# 2.3 STR 2.4 CIT 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAI 4.3 STR 4.4 CIT 5.3 STR 5.4 CIT 6.1 TITL</td> <td>B4 City Ove-named coporation by the corporation des. Agent signature requires LE AE LE ADDRESS Y-ST-ZIP LE AE EET ADDRESS Y-ST-ZIP E ME E AE E</td> <td>uired when reinstating)</td> <td></td> <td>PL rpose of change the appointme DATE RS AND DIREC Cha Cha</td> <td>Ing its CTORS ange ange inge</td> <td>s registered registered S IN 12 Addition</td>	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO DRS DELETE DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NA# 1.3 STR 1.4 CIT 2.1 TITI 2.2 NA# 2.3 STR 2.4 CIT 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAI 4.3 STR 4.4 CIT 5.3 STR 5.4 CIT 6.1 TITL	B4 City Ove-named coporation by the corporation des. Agent signature requires LE AE LE ADDRESS Y-ST-ZIP LE AE EET ADDRESS Y-ST-ZIP E ME E AE E	uired when reinstating)		PL rpose of change the appointme DATE RS AND DIREC Cha Cha	Ing its CTORS ange ange inge	s registered registered S IN 12 Addition
BROOKSVILLE FL 33512 11. Pursuant to the provisions of Soffice or registered agent, or agent. I am familiar with, and SIGNATURE 12. TIRLE PD NAME STREET ADDRESS CARAWAY, W. 524 EAST AVE BROOKSVILLE TITLE NAME STREET ADDRESS CARAWAY, W. STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CARAWAY, OP STREET ADDRESS CITY-ST-ZIP TITLE NAME JOHNSOTN, JC STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Sections 617.0502 and 617 both, in the State of Florida. accept the obligations of, S name of registered spent and litie if a OFFICERS AND DIRECTO C. FL AL FL DSEPH E., JR. (SVILLE AVE.	ppicable. (NO DRS DELETE DELETE DELETE DELETE DELETE DELETE	tes, the ab authorized lorida Statu TE: Registered 13. 1.1 TITI 1.2 NAF 1.3 STR 1.4 CIT 2.1 TITU 2.2 NAR 2.3 STR 2.4 CIT 3.3 STR 3.4. CIT 4.1 TITL 4.2 NAI 4.3 STR 5.3 STR 5.4 CIT 6.1 TITL 6.2 NAN	B4 City Ove-named coporation by the corporation des. Agent signature requires LE AE LE ADDRESS Y-ST-ZIP LE AE EET ADDRESS Y-ST-ZIP E ME E AE E	uired when reinstating)		Charge Charge	Ing its CTORS ange ange inge	s registered registered S IN 12 Addition

1

100