## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Wortham

Secretary of Care
DIVISION OF CORPORATIONS

(5)

**FILED** Apr 03 1997 8:00am Secretary of State

GOD'S ACRES CHURCH, INC.	4	I INNIH INNIH INNIH INNIH ITALI ITALI ABAD BAD	Bidis Bidis divisi divisi divisi divisi divisi sudi
, <b>Principal</b> Place of Business Mailing Address		1 100 H. 100 H. 100 H. 116 B. 116 H.	BIBNI BIBNI BIBNI BIBNI BIBNI HEBDI
702 SUNDANCE 702 SUNDANCE WIMAUMA FL 33598 WIMAUMA FL 33598 US US	7537		
2. Principal Place of Business Flag Mailing Address	598		3a. Date of Last Report 02/28/1996
21 V 02 Sundane Tee Down	acres	4. FEI Number 23-7043978	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 7 0 2	Sundane Tr	Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  City & State  City & State	mussa El	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
26 3359 8 25 Hills was 3359	Country 30 H	This corporation has liability for inta Florida Statutes	angible tax upder s. 199.032,
9. Name and Address of Current Régistered Agent		10. Name and Address of New Regis	tered Agent
KING, W. L. 702 SUNDANCE ROAD WIMAUMA FL 33598	81 Name  82 Street Addres  83  84 City	ss (P.O. Box Number is Not Acceptable)	3 ~
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida S office or registered agent, or both, in the State of Florida. Such change agent. I am familiar with, and accept the obligations of, Section 617.050.  SIGNATURE	tatutes, the above-named corporation was authorized by the corporation 3, Florida Statutes.		FL 85 Zip Code Sose of changing its registered ae appointment as registered
Signature, typed or printed name of registered agent and tibe if applicable  OFFICERS AND DIRECTORS	(NOTE: Registered Agent signature required		DATE
TITLE PD DELETE	13.	ADDITIONS/CHANGES TO OFFICER	
NAME KING, W. L Sen. Sugt.	1.2 NAME		☐ Change ☐ Addition 3
STREET ADDRESS 702 SUNDANCE TRAIL	1.3 STREET ADDRESS		{
CITY-ST-ZIP WIMAUMA FL	1.4 CITY-ST-ZIP	X	
TITLE TO DELETE	Sec 21 TALES	(1)	Change Addition
NAME KING, BELISA M.	20 WE	بالمرة للمحرج	Tout.
STREET ADDRESS 702 SUNDANCE TRAIL	2.3 STREET ADDRESS	م کو سون	CARRY TOT.
I DELETE	2.4 CITY-ST-ZIP	7	, ,
NAME BOWEN, WILLIAM merch Deve	3.1 TITLE 3.2 NAME	ter.	Change Addition
STREET ADDRESS 5802 MOORFIELD HWY 10 9 1000 Rus	3.3 STREET ADDRESS	Comment of	grown portion
CITY-ST-ZIP LIBERTY SC	29 CALIZ SI-ZIP	109 Dan Box	20100
TITLE D DECETE	4.1 TITLE	Sup mule	Change Addition
NAME PULICIAIN Survey	4 2 NAME CL	entice Cort Box	returned for
STREET ADDRESS 18224 C.R. 106 CITY-ST-ZIP COSHOCTON OF	4.3 STREET ADDRESS	TI Bay 193 ( ).	0
CITY-ST-ZIP LOSHOCTON ON	4.4 C(1Y - ST - Z(P	II Bol 193, Un	mler, 1 a 1 665 2
NAME KING, DANIEL	5.1 TITLE		Change Addition
STREET ADDRESS 702 SUN DANCE TRACE	5.2 NAME 5.3 STREET ADDRESS		
DITY-ST-ZIP WIMAUMA FL			
TITLE S DELETE.	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME MCCONKEY, HOWARD	6.2 NAME	600002132 -04/03/9701075-	BSE WOULDE
STREET ADDRESS RT.1, BREVARD RD	63 STREET ADDRESS	-04/03/9701075-	-011
DITY-ST-ZIP BEAVER PA	6.4.0(TV_ST_2)D	***70.00	\ , \ \ \
14. I do hereby certify that the information supplied with this filing does not question indicated on this annual report or supplemental annual report I am an officer or director of the corporation or the receiver or trustee empappears in Block 12 or Block 13 if changed, or on an attachment with an	is true and accurate and that my	Section 119.07(3)(i), Florida Statutes, I fi signature shall have the same legal effe required by Chapter 617, Florida Statut	urther certive that the ect as if made under eath; that es; and that try name
CONSTRUCT CARRIAGE STATE CARRIED CARRI			