

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 833413 (8)
1. Corporation Name
APOSTOLIC OVERCOMING HOLY CHURCH OF GOD

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:22**

Principal Place of Business
**103 AVERY ST.
DAYTONA BEACH FL 32014-0000**

Mailing Address
**103 AVERY ST.
DAYTONA BEACH FL 32014**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/23/1974	3a. Date of Last Report 02/23/1994
4. FEI Number 63-6093479	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. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**WHITE, ELDER LARNIE B.
103 AVERY ST.
DAYTONA BEACH FL 32014**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	
85. Zip Code	FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MATTHEWS, JOHN
STREET ADDRESS	3414 PIEDMONT AVENUE
CITY - ST - ZIP	DAYTON, OHIO 00000
TITLE	D
NAME	BELL, BISHOP L.M.
STREET ADDRESS	2000 PIO NONO AVE
CITY - ST - ZIP	MACON, GA 00000
TITLE	D
NAME	CRUTCHER, BISHOP G.
STREET ADDRESS	511 CHALMERS
CITY - ST - ZIP	DETROIT MI.
TITLE	D
NAME	AYERS, BISHOP GEORGE W.
STREET ADDRESS	2257 ST STEPHENS RD
CITY - ST - ZIP	MOBILE AL
TITLE	S
NAME	ARRINGTON, JUANITA R.
STREET ADDRESS	1120 N 24TH ST
CITY - ST - ZIP	BIRMINGHAM, AL 00000
TITLE	P
NAME	ROBY, BISHOP JASPER
STREET ADDRESS	1120 N 24TH ST
CITY - ST - ZIP	BIRMINGHAM, AL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 110.07(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:

Juanita R. Arrington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Juanita R. ARRINGTON 1/23/95
Date

Exempt From