

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90188 036 \*\*\*\*61.25

**DOCUMENT # 841955**

1. Entity Name

**INDEPENDENT HOLINESS DELIVERANCE CHURCH, INC.**

Principal Place of Business

1506 S SLAPPEY BLVD  
 PO BOX 4460  
 ALBANY GA 31706-4460

Mailing Address

1506 S SLAPPEY BLVD  
 PO BOX 4460  
 ALBANY GA 31706-4460

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**58-1383663**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIAMS, ISIAH  
 3318 HIGHLAND AVENUE  
 FT. MYERS FL 33916**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
 NAME **D FOWLER, DEACON ROLAND** ☐ Delete  
 STREET ADDRESS **1406 E TIFT**  
 CITY-ST-ZIP **ALBANY GA**

TITLE  
 NAME **T Hall, Gladis** ☐ Change ☒ Addition  
 STREET ADDRESS **Rte. 02, Box 1850**  
 CITY-ST-ZIP **Newton, Georgia 31770**

TITLE  
 NAME **D HAMILTON, DEACON ROBERT** ☐ Delete  
 STREET ADDRESS **204 LEXINGTON DR**  
 CITY-ST-ZIP **ALBANY GA**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME **VPD REVILLS, ELDER ULLAINEE** ☐ Delete  
 STREET ADDRESS **1618 MOULTRIE RD**  
 CITY-ST-ZIP **ALBANY GA**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME **STD HAWKINS, ANN W.** ☐ Delete  
 STREET ADDRESS **RT 2, BOX 900**  
 CITY-ST-ZIP **NEWTON GA**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME **T COLLINS, REBECCA D** ☐ Delete  
 STREET ADDRESS **APARTMENT 315, MALONE TOWERS**  
 CITY-ST-ZIP **ALBANY GA 31701**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME **P REVILLS, APOSTLE ISIAH** ☐ Delete  
 STREET ADDRESS **1618 MOULTRIE RD**  
 CITY-ST-ZIP **ALBANY GA**

TITLE  
 NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**ISIAH REVILLS**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Jan. 22, 2001**  
 Date

CR2E037 (10/00)

Doc. # 841955  
B0013415

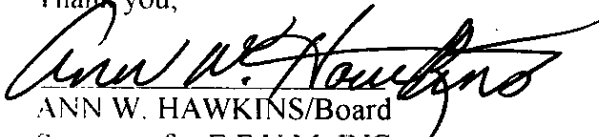
JANUARY 22, 2001

TO WHOM IT MAY CONCERN:

For the past five years or more, I have requested that Gladis Hall name be added to the list of names as a Trustee. Please do so. Enclosed also is a name changed from Independent Holiness Deliverance Church, Inc.; to Evangelical Faith Vision Ministries, Inc.

This tranaction was done in March of 1995.

Thank you,

  
ANN W. HAWKINS/Board  
Secretary for E.F.V.M. INC.

**Secretary of State  
Corporations Division  
Suite 315, West Tower  
2 Martin Luther King Jr. Dr.  
Atlanta, Georgia 30334-1530**

*Doc. # 841955*  
*B0013415*

DOCKET NUMBER : 950820776  
CONTROL NUMBER: 8002446  
EFFECTIVE DATE: 03/20/1995  
REFERENCE : 0045  
PRINT DATE : 03/23/1995  
FORM NUMBER : 611

WILLIAM D. MOORHEAD, III  
314 RESIDENCE AVE.  
ALBANY GA 31701

**CERTIFICATE OF NAME CHANGE AMENDMENT**

I, **MAX CLELAND**, Secretary of State and the Corporation Commissioner of the State of Georgia, do hereby certify under the seal of my office that

**INDEPENDENT HOLINESS DELIVERANCE CHURCH, INC.  
A DOMESTIC NONPROFIT CORPORATION**

has filed articles of amendment in the office of the Secretary of State changing its name to

**EVANGELICAL FAITH VISION MINISTRIES, INC.**

and has paid the required fees as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said articles of amendment.

**WITNESS** my hand and official seal in the City of Atlanta and the State of Georgia on the date set forth above.



*Max Cleland*

**MAX CLELAND  
SECRETARY OF STATE**