FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **F93000002581 (7)**

1. Corporation Name

OLD KEY STONE CHURCH, INC.

Principal Place of Business	Mailing Address
~~150 RIDGEWOOD DR.~~ ~~BOWLING GREEN KY 42103~~	~~150 RIDGEWOOD DR.~~ ~~BOWLING GREEN KY 42103~~

3. Date Incorporated or Qualified: **05/15/1993**
3a. Date of Last Report: **08/08/1995**

2. Principal Place of Business	2a. Mailing Address
21 Old Key Stone Church, Inc	26 Old Keystone Church, Inc.
Suite, Apt. #, etc. 22 330 Julia Street	Suite, Apt. #, etc. 27 330 Julia Street
City & State 23 Key West, FL	City & State 28 Key West, FL
Zip / Country 24 33040 / 25 MONROE	Zip / Country 29 33040 / 30 MONROE

4. FEI Number: **61-1238107** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WILLIS, TERESA A
~~**1217 WHITE STREET**~~
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 330 JULIA STREET
83
84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Section 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: Teresa Willis TERESA WILLIS 6-3-96
(Signature, typed or printed name of registered agent and date. NOTE: Registered Agent's signature is required when name is changed.) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PCD	☒ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	RICE, STANLEY B		1.2 NAME		
STREET ADDRESS	BOX 382 LITTLE KNOB ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP	SMITHS GROVE KY		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	WILLIS, TERRY		2.2 NAME		
STREET ADDRESS	~~150 RIDGEWOOD DR.~~		2.3 STREET ADDRESS	148 Ridgewood Dr.	
CITY-ST-ZIP	BOWLING GREEN KY		2.4 CITY-ST-ZIP	Bowling Green, Ky 42103	
TITLE	SD	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	WILLIS, TERESA A		3.2 NAME		
STREET ADDRESS	~~1217 WHITE STREET~~		3.3 STREET ADDRESS	330 JULIA St.	
CITY-ST-ZIP	KEY WEST FL 33040		3.4 CITY-ST-ZIP	KEY WEST, FL 33040	
TITLE	TD	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	SMITH, ERIC		4.2 NAME		
STREET ADDRESS	~~700 EISENHOWER STREET~~		4.3 STREET ADDRESS	330 JULIA STREET	
CITY-ST-ZIP	KEY WEST FL 33040		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Teresa Willis 6-3-96 305-296-6439
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TERESA Willis SEC