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# TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: CHURCI	H GROWTH MINISTRIE	S, INC	
	(PROPOSED CORPORATE  and one(1) copy of the article	E NAME – <u>MUST INCLUI</u>	
S70.00 Filing Fcc	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate  PY REQUIRED
FROM: James E.A. Stephens, Th. D.  Name (Printed or typed)			-
	5467 Vineland Rd. STE 6109 Address		
	Orlando, Florida 32811  City, State & Zip		
1- 866-705-7638			

NOTE: Please provide the original and one copy of the articles.

## ' ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

CHURCH GROWTH MINISTRIES, INC

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5487 VINELAND RD. STE 6109
ORLANDO, FLORIDA 32811

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO PROVIDE EDUCATION AND TRAINING; LEADERSHIP AND CHURCH GROWTH MINISTRIES

### ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed: THE REGULARLY MODE OF ELECTION- TO TAKE PLACE ANNUALLY

#### ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

AHMED Y STEPHENS- 5680 SE 52nd ct. OCALA, FLORIDA34480 LEON MONTGOMERY- 1076 HIDDEN BROOK TRL COLLEGE PARK, GA. 30349 SEAN ROPER-2521 RIO PINAR LKS BLVD ORLANDO, FLORIDA 32822 PAULINE D. VEREEN-530 SW 23rd AVE. OCALA, FLORIDA 34474 NINA R. SNOWDEN-3910 SE 57th ct. OCALA, FLORIDA 34480

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:

JAMES E.A. STEPHENS, Th. D. 3910 SE 57th ct. OCALA, FLORIDA 34480

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES E.A. STEPHENS, Th.D. 8467 VINELAND Rd. STE. 6109 - OPLANDO, FL 32811

Heving been named as registered agent to accept service of profine certificate, I am familiar with and accept the appointment	ocess for the above stated corporation at the place design ent as registered opent and agree to act in this capacity.
Mr. fil	wholad
Signature Registered Agent	Date
1 Hours Harry	arlac M
Signature/I corpo ator	Date

SECRETARY OF STATE AND 10 THE STATE AND