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	(Requestor's Name)			
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(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





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SECRETARY OF STATE

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TRANSMITTAL LETTER ,

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

SUBJECT: Cap Stor	ne African Center Ministr	y Corporation	
	(PROPOSED CORPORATE	E NAME – <u>MUST INCLUI</u>	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED
FROM: Eugene Johnson Name (Printed or typed) 5202 Collins Street Address			-
			.
	Panama City, FL 32404 City, State & Zip		
	850-763-2130	ephone number	. – -

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:

Cap Stone African Center Ministry Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3478 Business 98
Panama City, FL 32404

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To carry out non-profit religious activities where services are regularly conducted.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Appointed to serve until their respective successors are chosen and qualified

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

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

Eugene Johnson - 5202 Collins Street - Panama City, FL 32404 - Director Wayne Jones - 7A Bob Sikes Drive - Panama City, FL 32401 - Secretary Troy Williams - 4014 Delisa Avenue - Panama City, FL 32404 - Treasurer

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Shirley Harris - 233 N Tyndall Parkway - Panama City, FL 32404

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Eugene Johnson - 5202 Collins Street - Panama City, FL 32404

************************	*********
Having been named as registered agent to accept service of process for the	above stated corporation at the place designate
in this certificate, I am familiar with and accept the appointment as registe	ered agent and agree to act in this capacity.
Shulle O Harris	1-23-04
Signature/Registered Agent	Date
Enthur	1-23-04
Signature/Incorporator	Date

APR 30 PM