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Apr 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N10213 (9)

1. Corporation Name

OSCEOLA CHURCH, INC.

Principal Place of Business

Mailing Address

1700 E. IRLO BRONSON MEM. HWY.
KISSIMMEE FL 34744

1700 E. IRLO BRONSON MEM. HWY.
KISSIMMEE FL 34744-3724



3. Date Incorporated or Qualified
07/15/1985

3a. Date of Last Report
04/25/1996

2. Principal Place of Business

2a. Mailing Address

21

26

PO BOX 451481

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

FL

30

US

4. FEI Number
59-2557790

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

10. Name and Address of New Registered Agent

HAYES, DANNY LUTHER
107 LAKEVIEW DRIVE-
ST. CLOUD FL 34709

81 Name

DANNY LUTHER HAYES

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

83

3152 Lake Breeze Circle

84 City

St. cloud

FL

85 Zip Code

34771

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☐ DELETE
NAME SMITH, DONALD L.
STREET ADDRESS 1212 BETH LANE
CITY-ST-ZIP ST CLOUD FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE PD ☐ DELETE
NAME HAYES, DANNY L.
STREET ADDRESS 107 LAKEVIEW DRIVE
CITY-ST-ZIP ST. CLOUD FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Danny Hayes
2.3 STREET ADDRESS 3152 Lake Breeze Circle
2.4 CITY-ST-ZIP St. cloud FL 34771

TITLE D ☐ DELETE
NAME KEEL, JAMES M.
STREET ADDRESS 112 LAKEVIEW DR
CITY-ST-ZIP ST CLOUD FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Danny L. Hayes

3/3/97

407.047-3732

CR2E037 (9/96)