

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N31687 1. Entity Name SKILLS APPLIED FOR EVANGELISM, INC.	
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Principal Place of Business 1216 GOLFVIEW DR. %VIRGINIA L. DUGAN (PO BX 4107, SD 32 DAYTONA BEACH FL 32114	Mailing Address PO BOX 214107 %VIRGINIA L. DUGAN (PO BX 4107, SD 32 SOUTH DAYTONA FL 32121
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE	CR2E037 (10/07)
4. FEI Number 59-2951557	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DUGAN, VIRGINIA L. 1216 GOLFVIEW DR. DAYTONA BEACH FL 32114
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. I am familiar with, and accept the obligations of registered agent
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)
DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRINSTON, JEROME 1216 GOLFVIEW DR DAYTONA BEACH FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JONES, CHARLES R. 466 CHARLOTTA AVE SE PALM BAY FL 32909 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JONES, PATRICIA 466 CHALOTTA AVE SE PALM BAY FL 32909 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORLOSKY, DONALD 813 PARK TRAIL DR CLERMONT FL 34711 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED DUGAN, DONALD V 1216 GOLFVIEW DR DAYTONA BEACH FL 32114 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEWITT, BARRY D 1712 FLORENCE AVE NEW ALBANY IN 47150 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	000000737428 ☐ Change ☐ Addition 01/29/08-80072-010 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 recorder 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:  DONALD V DUGAN 1/22/08 386 255-6960