NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

N42049

DOCUMENT # N42049

1. Corporation Name: Deeper Waters Christian Center

FILED
95 APR 24 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address

4-24 DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12-29-92
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 DEEPER WATERS CHRISTIAN CENTER	26 DEEPER WATERS CHRISTIAN CENTER
Suite, Apt. #, etc: 22 7541 LEM TURNER RD	Suite, Apt. #, etc: 27 P.O. BOX 40692
City & State: 23 JACKSONVILLE, FL.	City & State: 28 JACKSONVILLE, FL.
Zip: 24 32208 Country: 25 U.S.A.	Zip: 29 32203 Country: 30 U.S.A.

4. FEI Number: 59-3025601 ☐ 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
MYRUM MOORE 2529 MARCH HARE LANE JACKSONVILLE, FL. 32210	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 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: Myrum Moore — MYRUM MOORE — 4/20/95
(Signature of the new registered agent, if changed) (Name of Registered Agent typed or printed) (Date)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D PRESIDENT/FOUNDING PASTOR NAME: HERBERT A. ROZIERS STREET ADDRESS: 1235 TURTLE CREEK DR. S. CITY ST ZIP: JACKSONVILLE, FL. 32218	11 TITLE ☐ Change ☐ Addition 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP 300001468278 -04/28/95--01054--007 ****131.25 ****131.25
TITLE: D VICE PRESIDENT NAME: KAREN W. ROZIERS STREET ADDRESS: 1235 TURTLE CREEK DR. S. CITY ST ZIP: JACKSONVILLE, FL. 32218	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP
TITLE: SECRETARY NAME: ELLIS McGHEE STREET ADDRESS: 2306 GRAND AVE. CITY ST ZIP: JACKSONVILLE, FL. 32208	31 TITLE: D SECRETARY ☒ Change ☐ Addition 32 NAME: JOYCE A. McELVIN 33 STREET ADDRESS: 2306 FIRESTONE RD 34 CITY ST ZIP: JACKSONVILLE, FL. 32210
TITLE: TREASURER NAME: EUNICE WAY STREET ADDRESS: 2657 LOWES PLACE CITY ST ZIP: JACKSONVILLE, FL. 32208	41 TITLE: D TREASURER ☒ Change ☐ Addition 42 NAME: MYRUM MOORE 43 STREET ADDRESS: 2529 MARCH HARE LANE 44 CITY ST ZIP: JACKSONVILLE, FL. 32210
TITLE NAME STREET ADDRESS CITY ST ZIP	51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP
TITLE NAME STREET ADDRESS CITY ST ZIP	61 TITLE ☐ Change ☐ Addition 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP CWS 94/95AR kwm

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 above, or on an attachment with an address.

SIGNATURE: Herbert A. Roziers — HERBERT A. ROZIERS — 4/20/95 — (904) 757-0086
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number