

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # N43862 (4)

1. Corporation Name
JERICO OUTREACH MINISTRY, INC.

Principal Place of Business ST. PAUL'S EPISCOPAL CHURCH 10 W KING ST QUINCY FL 32351	Mailing Address P.O. BOX 1774 QUINCY FL 32353
--	---

3. Date Incorporated or Qualified
06/13/1991

4. FEI Number
59-3069033

Applied For
☐ Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
---	--

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**WILDING, RANDY L
NEW PHILADELPHIA PRESBYTERIAN CHURCH
746 S ADAMS STREET
QUINCY FL 32351**

10. Name and Address of New Registered Agent

81 Name **Hall, Laurie**
82 Street Address (P.O. Box Number is Not Acceptable) **New Philadelphia Presb. Church**
83 **746 S. Adams Street**
84 City **Quincy** **FL** **85** Zip Code **32351**

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 *Laurie V. Hall* (NOTE: Registered Agent signature required when reinstating) **Laurie Hall, Treasurer** DATE **1/26/98**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	FLETCHER, HOWARD	
STREET ADDRESS	FOREST DR. (PO BOX 899)	
CITY-ST-ZIP	QUINCY FL 32351	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTIN, KENNETH	
STREET ADDRESS	924 W. MYRTLE AVE.	
CITY-ST-ZIP	QUINCY FL 32351	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	BLITCH, RAY	
STREET ADDRESS	1107 N. MAGNOLIA DR.	
CITY-ST-ZIP	QUINCY FL 32351	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	WILDING, RANDY L	
STREET ADDRESS	249 CHEESEBOROUGH AVE	
CITY-ST-ZIP	QUINCY FL 32351	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	TD Hall, Laurie V.
4.3 STREET ADDRESS	776 S. Dural St.
4.4 CITY-ST-ZIP	Quincy, FL 32351
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 *Laurie V. Hall*

CR2E037 (10/97)