FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Worthaid

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N46692

1. Corporation Name

(2)

GOD'S FINAL WORD MISSION CENTER, INC.

Principal Place of Business Mailing Address						DI BIBLIF BIBIF BIBIK BIBIK BIBIK BIBIK KADIF KADIF	
3027 PACE STREET 3027 PACE STREET ORLANDO FL 32810 ORLANDO FL 32810 ORLANDO FL 32810-5132							
					3. Date Incorporated or Qualified 01/08/1992	3a. Date of East Report 05/28/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 59-3104854	Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Not Applicable \$8.75 Additional	
22		27	27		5. Certificate of Status Desired	Fee Required	
City & State		City & State	⊢ ′		6. Election Campaign Financing	\$5.00 May Be	
23 Zin	Countai	28			Trust Fund Contribution	Added to Fees	
Zip, .				ry	8. This corporation has liability for in		
24 7 25 29 30 30 9. Name and Address of Current Registered Agent					Florida Statutes Yes No 10. Name and Address of New Registered Agent		
GREEN, ERVIN L.				O Chroni Ad	LAdder (O.O. De New York Alexander)		
3027 PACE STREET				Street Address (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32810			8	3			
			8	4 City		85 Zip Code	
<u> </u>				1		FL []	
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 .							
12.	Signature, typed or printed name of registers	ed agent and tille II applicable. (NOT AND DIRECTORS	IE: Registered A	gent signature req	julred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE OR AND DIDECTORS IN 13	
TITLE	5	DELETE	1.1 TITLE			Change Addition	
NAME	MORETON, DAVID H.	<u> </u>	1.2 NAM		D John Johnson		
STREET ADDRESS	590 ESTATES PLACE			ET ADDRESS	John Johnson		
CITY-ST-ZIP	LONGWOOD FL		1.4 CITY	1	514 Nantucket Ct. #20	22714	
TITLE	D	☐ DELETE	2.1 TITLE		Altamonte Springs, Fl	32714 Addition	
NAME	FRANTA, JOHN C.		22 NAMI			**	
STREET ADDRESS	360 GOLF BROOK CIRCL	É	2.3 STRE	et address	Vernon Roberts	_	
CITY-ST-ZIP	LONGWOOD FL		2. 4 CITY	-ST-ZIP	6336 Royal Tern Stree		
TITLE	D	☐ DELETE	3.1 TITLE		D D	☐ Change ★ Addition	
NAME	SUNDERMAN, ERIC J.		3 2 NAME				
STREET ADDRESS	407 WEKIVA SPRINGS RO	JAU		et address	J. Scott Singmaster 1140 Ansley Cir. #30		
CITY-ST-ZIP	LONGWOOD FL	- Decision	3.4. CITY				
TITLE NAME	Green, Ervin L.	☐ DELETE	4.1 TITLE		Apopka, Fl. 32703	☐ Change ☐ Addition	
STREET ADDRESS	3027 PACE ST.		4. 2 NAM				
CITY-ST-ZIP	ORLANDO FL		1	T ADDRESS			
TITLE	VIII IIV I L	DELETE	4.4 City - 5.1 Title			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	1			
TITLE		DELETE	6.1 TITLE		77777744.44	Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREI	T ADDRESS			
CITY-ST-ZIP	<u></u>		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.

CR2E037 (9/96

FILED

Jul 15 1997 8:00am

Secretary of State