

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -6 PM 12:15

DOCUMENT # N47787 (9)
1. Corporation Name
THE REDEEMER APOSTOLIC CHURCH OF JESUS INC.

Principal Place of Business 1145 SEVENTH STREET NORTH SAFETY HARBOR FL 34695	Mailing Address 1145 SEVENTH STREET NORTH SAFETY HARBOR FL 34695
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/11/1992	3a. Date of Last Report 03/03/1994
4. FEI Number 59-3112459	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

9. Name and Address of Current Registered Agent	
PARKER, ROSAVELT 1145 SEVENTH STREET NORTH SAFETY HARBOR FL 34695	

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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reconstituting) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1 1 TITLE	☐ Change ☐ Addition
NAME	PARKER, ROSAVELT	1 2 NAME	
STREET ADDRESS	1145 7TH STREET NORTH	1 3 STREET ADDRESS	
CITY - ST - ZIP	SAFETY HARBOR FL	1 4 CITY - ST - ZIP	
TITLE	VD	2 1 TITLE	☐ Change ☐ Addition
NAME	MOORE, BOBBY G	2 2 NAME	
STREET ADDRESS	1421 28TH STREET SOUTH	2 3 STREET ADDRESS	
CITY - ST - ZIP	ST PETERSBURG FL	2 4 CITY - ST - ZIP	
TITLE	T	3 1 TITLE	☐ Change ☐ Addition
NAME	SIMMONS, CLIFFORD	3 2 NAME	
STREET ADDRESS	3544 3 AVE S.	3 3 STREET ADDRESS	
CITY - ST - ZIP	ST PETERSBURG FL	3 4 CITY - ST - ZIP	
TITLE	S	4 1 TITLE	☐ Change ☐ Addition
NAME	SIMMONS, DEBORAH A.	4 2 NAME	
STREET ADDRESS	3544 3 AVE S.	4 3 STREET ADDRESS	
CITY - ST - ZIP	ST PETERSBURG FL	4 4 CITY - ST - ZIP	
TITLE	T	5 1 TITLE	☐ Change ☐ Addition
NAME	JACKSON, CHARLES II	5 2 NAME	
STREET ADDRESS	337-113 ST WEST	5 3 STREET ADDRESS	
CITY - ST - ZIP	PALMETTO FL	5 4 CITY - ST - ZIP	
TITLE	T	6 1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, ORVIL	6 2 NAME	
STREET ADDRESS	2165 15 APT #8	6 3 STREET ADDRESS	
CITY - ST - ZIP	ST PETE FL	6 4 CITY - ST - ZIP	

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 110.07(3)(k), 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: ROSAVELT PARKER
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

4-1-95
DATE