Apr 14, 1999 8:00 am Secretary of State **NONPROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 04-14-1999 90094 016 ****61.25 DIVISION OF CORPORATIONS 1999 **DOCUMENT # N49126** CHURCH OF JESUS CHRIST PENTECOSTAL ASSEMBLIES OF 7 8 9 1 578016 - 90004 - 2 APOSTOLIC FAITH INC Principal Place of Business Mailing Address 3931 TOWHEE LANE 28 W BTH ST JACKSONVILLE FL 32207-6136 JACKSONVILLE FL 32205 3. Date incorporated or Qualifed 2a. Mailing Address 2. Principal Place of Business 05/29/1992 1399 26 4. FEI Number Applied For Suite, Apt. #, etc. Suite, Apt. #, etc 59-3136535 Not Applicable JACHSONVILLE 27 \$8.75 Additional City & State City & State 5. Certificate of Status Desired Fee Required 28 Country \$5.00 May Be 6. Election Campaign Financing \Box 32204 Added to Fees 30 Trust Fund Contribution 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) FLETCHER, JOE L 3931 TOWHEE LN JACKSONVILLE FL 32207-6136 85 Zip Code 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, if am familiar with, and accept the obligations of Section 617.0503, Florida Statutes. SIGNATURE (11/98)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change DELETE 1.1 TITLE TITLE William FLETCHER WOODFORK, ODETHA 1.2 NAME NAME 2103 Melson Ave 1.3 STREET ADDRESS 3230 BREVE DR. STREET ADDRESS JACKSONVIlle 1.4 CITY-ST-ZIP JACKSONVILLE FL 32209 CITY-ST-ZIP Change ☐ Addition DELETE 21 TITLE 2.2 NAME NAME FLETCHER, DOROTHY 2.3 STREET ADDRESS STREET ADORESS 3931 TOWHEE LN. 2.4 CTTY-ST-ZIP JACKSONVILLE FL 32207 CITY-ST-ZIP Addition Change DELETE 31 TILE TITLE 32 NAME FLETCHER, BERNARD NAME 13 STREET ADDRES STREET ADDRESS 3983 O'RIELY DR 3.4. CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZP Change ☐ Addition DELETE 41THE TILE 4 2 NAME FLETCHER, JOE 4.3 STREET ADDRESS STREET ADDRES 3931 TOWHEE LN. 4.4 CITY-ST-ZIP CITY-ST-ZP JACKSONVILLE FL 32207

6.ACTY-ST-ZP

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 Stabutes. 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, with all other like empowered.

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

me

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CTTY-ST-ZIP

2nd 300	17:125	REQUIRED
SIGNATURE AND TYPED OR	PRINTED NAME OF BIG	NING OFFICER OR DIRECTOR

□ DELETE

DELETE

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(904) 3987875 Daylime Phone I

Change

Change

Addition

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