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Apr 25 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N49795 (0)

1. Corporation Name

MORNING STAR CHRISTIAN FELLOWSHIP, INCORPORATED

Principal Place of Business

Mailing Address

1801 WALNUT ST
#8
JACKSONVILLE FL 32206
US

P.O. BOX 26638
#8
JACKSONVILLE FL 32226-6638
US

2. Principal Place of Business

21 101 West 48th St.

Suite, Apt. #, etc.

22 //

City & State

23 Jax., FL

Zip

24 32208

Country

25 US

2a. Mailing Address

26 P.O. Box 9802

Suite, Apt. #, etc.

27 //

City & State

28 Jacksonville, FL

Zip

29 32208

Country

30 US

3. Date Incorporated or Qualified

07/09/1992

3a. Date of Last Report

04/16/1996

4. FEI Number

59-3135378

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

WILLIAMS, KENNETH A.
4480 MELISSA COURT W
JAX FL 32210

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

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCD ☐ DELETE
NAME WILLIAMS, KENNETH A
STREET ADDRESS 4480 MELISSA COURT W
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE VTSD ☐ DELETE
NAME WILLIAMS, CHARLENE S.
STREET ADDRESS 4480 MELISSA COURT W
CITY-ST-ZIP JACKSONVILLE FL 32210

TITLE D ☐ DELETE
NAME SELLERS, DEMETRICE A
STREET ADDRESS 311 W 8TH STREET
CITY-ST-ZIP JACKSONVILLE FL 32206

TITLE D ☐ DELETE
NAME STOKES, HERBERT JR
STREET ADDRESS 4032 KATANGA DR. S.
CITY-ST-ZIP JACKSONVILLE FL 32209

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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)