

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

1995



DOCUMENT # N92000000267 (6)

MINISTRIES OF FAITH, HOPE AND LOVE, INC.

1901 OLEVIA ST
JACKSONVILLE FL 32207
US

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JACKSONVILLE FL 32207
US

3. Certificate of Incorporation or Charter	3a. Date of Last Report
11/12/1992	05/01/1994
4. Filer Number	Applied For
59-3132930	Not Applicable
5. Certificate of Status (Domestic)	\$8.75 Additional Fee Required
☐	
6. Tax Exempt Status (Domestic)	\$5.00 May Be Added to Fees
☐	
7. Nonprofit with IRS Section 501(c)(3) Tax Exempt Status	\$68.75 Supplemental Fee Not Required
☒	
8. This corporation has liability for intangible tax under S. 199 (C.R.) Florida Statutes	☐ Yes ☒ No

2. Principal Office	2a. Mailing Address
21. 7856 Glen Echo Rd N	26. 1243 Arlington Rd N
22. Jacksonville FL	27. P.O. Box 217
23. Jacksonville FL	28. Jacksonville FL
24. 32211	25. U.S.A.
29. 32211-5814	30. U.S.A.

9. Name and Address of Current Registered Agent

RETZER, MAXINE D
1931 OLEVIA ST
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83. City	84. State	85. Zip Code
	7856 Glen Echo Rd N	Jacksonville	FL	32211

11. Pursuant to the provisions of Sections 607.02(2)(b) and 607.02(2)(c) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent 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 607.02(2)(b) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. AGENTS FOR CHANGING REGISTERED AGENTS AND VOTABLE STOCKHOLDERS	
12.1 NAME	PD RETZER, MAXINE D 7856 GLEN ECHO RD N JACKSONVILLE FL	13.1 NAME	☐ Change ☒ Addition
12.2 STREET ADDRESS		13.2 STREET ADDRESS	
12.3 CITY		13.3 CITY	32211
12.4 STATE	VD NIEMEYER, GWENDLOYN 1458 DOMAS DR JACKSONVILLE FL	13.4 STATE	☒ Change ☒ Addition
12.5 ZIP CODE		13.5 ZIP CODE	32211
12.6 NAME	STD RETZER, CATHERINE 7856 GLEN ECHO RD N JACKSONVILLE FL	13.6 NAME	☐ Change ☒ Addition
12.7 STREET ADDRESS		13.7 STREET ADDRESS	
12.8 CITY		13.8 CITY	32211
12.9 STATE		13.9 STATE	☐ Change ☐ Addition
12.10 ZIP CODE		13.10 ZIP CODE	
12.11 NAME		13.11 NAME	☐ Change ☐ Addition
12.12 STREET ADDRESS		13.12 STREET ADDRESS	
12.13 CITY		13.13 CITY	
12.14 STATE		13.14 STATE	☐ Change ☐ Addition
12.15 ZIP CODE		13.15 ZIP CODE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.02(2)(b) Florida Statutes. I further certify that the information included in 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 any officer or director of the corporation or the manager or trustee empowered to make this report as required by Chapter 607 Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing, is an individual with an address.

SIGNATURE:

Maxine D. Retzer
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

April 27, 1995

(904)
724-7693