## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # N9200000734 (5)

## FOUNDATION FOR MISSION CHURCHES, INC.

Principal Place of	of Business	Mailing Address	3				<b>78</b> 00 <b>78</b> 00 <b>78</b> 00 <b>78</b> 00 18	
% O.L. JACK WHITE % O.L. JACK WH				HITE IC AVENUE: #708				
	ACH SHORES FL 32127	DAYTONA BEACH SHORES FL 32127				3. Date Incorporated or Qualified 12/09/1992	3a. Date of Last 06/22/	
2. Principal Plac	ce of Business	2a. Mailing Add	ress	<del></del>		4. FEI Number 59-3154839		Applied For
21		26				39-3 134639	¢0.7	Not Applicable  5 Additional
Suite, Apt. #	, etc.	Suite, Apt. :	r, etc.			5. Certificate of Status Desired	1 1 7 -	Required
City & State		City & State	)			6. Election Campaign Financing	<b>\$5.0</b>	00 May Be
23		28				Trust Fund Contribution	L. Add	ed to Fees
Zıρ	Country	Zip		Country		8. This corporation has liability for in	ntangible tax under s	: 199.032,
24	25	29		0		Florida Statutes L.  10. Name and Address of New Re	Yes No	
	9. Name and Address of Curren	it Hegistered Ageni		81	Name	10. Name and Address of New III	agiatorou Agont	
				Ĺ				
	O.L. JACK			82	Street Ad	dress (P.O. Box Number is Not Acceptable	e)	
3555 S. Suite 7	ATANTIC AVENUE			83				
	IA BEACH SHORES FL 32127				6		los 7	'ip Code
DATION	A BEACH SHOKES I'E SELE.			84	City			ір Сооб
11. Pursuant to	o the provisions of Sections 617.0502	and 617.1508, Flori	da Statutes,	the above-	named corp	oration submits this statement for the purporation of directors. I hereby accept the appo	pose of changing its	registered officed agent. I am
or registere familiar witl	ed agent, or both, in the State of Fiori h, and accept the obligations of, Sect	tion 617.0503, Florida	a Statutes.	by the corp	Organom 5 De	and on anothers. Thereby accept the appro-		3
SIGNATURE _								
!	Signature, typed or printed nanie of registered agent		-этси)	Registered Ager	it signature requ	irea when reinstating)  ADD/TIONS/CHANGES TO OFF	DATE OF RS AND DIRECT	ORS IN 12
12. TITLE	D OFFICERS AN	D DIRECTORS	ELETE	1 1 TITLE		PEDATIONS OF WATER OF THE	Change	
	AYERS, R. T			1.2 NAME				_
NAME PROCES ADDRESS	7000 NICHOLS ROAD				ADDRESS			
STREET ADDRESS CITY-ST-ZIP	OKLAHOMA CITY OK 73116			1.4 CITY - S				
TITLE	D	D	ELETE	2 1 TITLE	-		Change	Addition
NAME	WELCH, BOBBY			2 2 NAME				
STREET ADDRESS	291 PARRULLI DRIVE			2.3 STREE	ADDRESS			
CITY - ST - ZIP	ORMOND BEACH FL 32174			2 4 CITY	ST-ZiP			
TIFLE	D		ELETE	3 1 TITLE			Change	Addition
NAME	WHITE, JAMES (GENE)			3 2 NAME				
STREET ADDRESS	116 W. OCEAN DUNES ROA			3 3 STREE	ADDRESS			
C(TY-ST-7)P	DAYTONA BEACH FL 32118		C. C.Y.C.	34 CITY-	S1-ZIP		Change	Addition
TITLE	D		ELETE	4.1 TITLE			, Li Grange	, La , la de la constante la co
NAME	WHITE, O.L. JACK	#700		4 2 NAME				
STREET ADDRESS	3555 S. ATLANTIC AVENUE				T ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL 32127		ELETE	4.4 CITY - 5.1 THILE	31 · ZIF		☐ Change	Addition
TITLE NAME		ى -		5 2 NAME	-			
STREET ADDRESS					T ADDRESS			
CITY+ST-ZIP				5 4 CITY -				
TILE			ELETE	61 TITLE			☐ Chang	Addition
NAME				62 NAME	ļ			
STREET ADDRESS				63 STREE	T ADDRESS			
C-17- C1 30				6.4 CHTY-	ST-ZIP			
14. Loo hereb	by certify that the information supplied If the information indicated on this and I am an officer or director of the corp in Block 12 or Block 13 if changed or	with this filing is voluntial report or supplem oration or the receive on an attachment w	intarily furnish mental annua er or trustee e ith an addres	ned and do it report is tre empowered is.	es not qualifue and acc to execute	fy for the exemption stated in Section 119 urate and that my signature shall have the this report as required by Chapter 617, F	.07(3)(k), Florida Sta same legal effect as lorida Statutes; and	tutes. I further s if made under that my name

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-96