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Jun 25 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # N93000000674 (2)

1. Corporation Name

FIRE OF THE WORD WORLD OUTREACH FELLOWSHIP INC.



Principal Place of Business

Mailing Address

5530 ATOMA STREET  
#3  
JACKSONVILLE FL 32244  
US

P.O. BOX 61072  
JACKSONVILLE FL 32236  
US

3. Date Incorporated or Qualified

02/09/1993

4. FEI Number

59-3172007

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 5530 Catoma Street

26 5530 Catoma Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #3

27 #3

City & State

City & State

23 Jacksonville FL

28 Jacksonville FL

Zip

Country

Zip

Country

24 32244

25 US

29 32244

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WILLIAMS, STANLEY M  
3608 MORNING MEADOW LANE  
ORANGE PARK FL 32073

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

*Stanley Williams*

(NOTE: Registered Agent signature required when reinstating)

DATE

14 June 98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME DP  
WILLIAMS, STANLEY M  
STREET ADDRESS 8342 KNOTTS LANDING DRIVE EAST  
CITY-ST-ZIP JACKSONVILLE FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME DP  
1.3 STREET ADDRESS WILLIAMS, STANLEY M  
1.4 CITY-ST-ZIP 3608 MORNING MEADOW LANE  
JACKSONVILLE ORANGE PARK FL 32073

TITLE ☐ DELETE

NAME DVT  
WILLIAMS, EUNICE D  
STREET ADDRESS 8342 KNOTTS LANDING DRIVE EAST  
CITY-ST-ZIP JACKSONVILLE FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME DVT  
2.3 STREET ADDRESS WILLIAMS, EUNICE D  
2.4 CITY-ST-ZIP 3608 MORNING MEADOW LANE  
ORANGE PARK FL 32073

TITLE ☐ DELETE

NAME DS  
WALKER, GERALD  
STREET ADDRESS 11314 MONUMENT LANDING BLVD  
CITY-ST-ZIP JACKSONVILLE FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME DD  
BONAPARTE, JAMES  
STREET ADDRESS 4919 RIDGEWAY DRIVE EAST  
CITY-ST-ZIP JACKSONVILLE FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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

*Stanley Williams*

*Stanley Williams* 14 June 98

CR2E037 (10/97)