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95 MAY -1 AM 10: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT **1995**

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

DOCUMENT # N93000002615 (3)

1. Corporation Name

THE FUTURE IS NOW, MINISTRIES, INC.

Principal Place of Business	Mailing Address
1853 WINTERGREEN RD CARROLLTON TX 75006 US	1853 WINTERGREEN RD CARROLLTON TX 75006 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26 1853 Wintergreen Rd
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State Carrollton, TX
24 Zip / 25 Country	29 Zip 75006 / 30 Country USA

3. Date Incorporated or Qualified: 06/04/1993
3a. Date of Last Report: 04/08/1994
4. FEI Number: 75-2513761 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CRAIG, BILLY G
4918 LAVENTANA CIR
PENSACOLA FL 32526

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 607.0502 and 607.1508, 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 607.0505, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDC	1 1 TITLE	☐ Change ☐ Addition
NAME	CRAIG, MARK ALAN	1 2 NAME	
STREET ADDRESS	1853 WINTERGREEN RD	1 3 STREET ADDRESS	
CITY - ST - ZIP	CARROLLTON TX	1 4 CITY - ST - ZIP	
TITLE	VPD	2 1 TITLE	☐ Change ☐ Addition
NAME	CRAIG, BILLY G	2 2 NAME	
STREET ADDRESS	4918 LAVENTANA CIR	2 3 STREET ADDRESS	
CITY - ST - ZIP	PENSACOLA TX	2 4 CITY - ST - ZIP	
TITLE	STD	3 1 TITLE	☐ Change ☐ Addition
NAME	ODOM, SENDI CRIAG	3 2 NAME	
STREET ADDRESS	7161 MELBA ST	3 3 STREET ADDRESS	
CITY - ST - ZIP	PENSACOLA FL	3 4 CITY - ST - ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY - ST - ZIP		4 4 CITY - ST - ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Mark Alan Craig, Chairman 04-29-95 214-466-2232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MARK ALAN CRAIG, Chairman

0074729