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May 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N93000004421 (4)**
1. Corporation Name

JERUSALEM FUNDAMENTAL BAPTIST CHURCH INC.



Principal Place of Business
**2525 JACKSON ST.
FORT MYERS FL 33901
US**

Mailing Address
**2525 JACKSON STREET
FORT MYERS FL 33901**

3. Date Incorporated or Qualified

09/30/1993

4. FEI Number

65-0465492

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ST. MARC, ROLAND
8364 BEACON BLVD
FORT MYERS FL 33907**

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

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

Roland Saint Marc
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **ST. MARK, ROALND D**
STREET ADDRESS **8364 BEACON BLVD**
CITY-ST-ZIP **FORT MYERS FL 33901**

TITLE **TD** ☐ DELETE
NAME **JOSEPH, LEONNE**
STREET ADDRESS **4644 SANTA BARSAND BLVD**
CITY-ST-ZIP **CAPE COARAL FL 33914**

TITLE **CD** ☐ DELETE
NAME **CAPRILE, SERGO**
STREET ADDRESS **1718 SW SECOND PL.**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE **S** ☐ DELETE
NAME **CAPRILE, NICOLANE**
STREET ADDRESS **1718SW SECOND PL**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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, 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 in an attachment with an address.

SIGNATURE:

Roland Saint Marc

4/29/98

CR2E037 (10/97)