FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT

1995 S-11-95 B-67097 C

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

APPROVED AND FILED

95 MAY 11 AM 8:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N94000001474 (5)**

1. Corporation Name

AMBASSADORS FOR CHRIST BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
7909 POWDER HORN LN ORLANDO FL 33512	7909 POWDER HORN LN ORLANDO FL 33512

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/21/1994
3a. Date of Last Report:
4. FEI Number: ☐ 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 activity for intangible tax (Chapter 199.032, Florida Statutes) ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent

WRIGHT, RICKEY W
7909 POWDER HORN LN
ORLANDO FL 33512

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: Rickey W. Wright (President) — DATE: 5-6-95
Signature, typed or printed name of registered agent and title if agent is an officer — NOTE: Registered Agent's signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	WRIGHT, RICKEY	12 NAME	
STREET ADDRESS	7909 POWDER HORN LN	13 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 33512	14 CITY ST ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	WRIGHT, VIRGINIA	22 NAME	
STREET ADDRESS	7909 POWDER HORN LN	23 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 33512	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	STUDSTILL, PRINCETON	32 NAME	
STREET ADDRESS	4344 AETNA DR	33 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 32808	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	STUDSTILL, KOSHERYL	42 NAME	
STREET ADDRESS	4344 AETNA DR	43 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 32808	44 CITY ST ZIP	
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	JONES, DEWITT	52 NAME	D JONES, DEWITT
STREET ADDRESS	4414 LAKE LAWNE DR	53 STREET ADDRESS	4414 Lake Lawne Dr.
CITY ST ZIP	ORLANDO FL 32808	54 CITY ST ZIP	Orlando, FL. 32808
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(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: Rickey W. Wright — 5-6-95 — 407-382-1733
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0034939