SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997

JACKSONVILLE FL

CITY-ST-ZIP

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236,25). Sep 22 1997 8:00am NONPROFIT FLORIDA DEPARTMENTIOF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 N94000001922 (3) DOCUMENT # MILLER STREET CHURCH OF CHRIST, INC. Principal Place of Business Maiting Address MILLER ST. CHURCH OF CHRIST 1211 MILLER STREET ORANGE PARK FL 32073 ORANGE PARK FL 32073 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report 3. Date Incorporated or Qualified 04/14/1994 05/01/1996 Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 59-3291779 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes Yes 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SQUIRE, ERNEST 82 Street Address (P.O. Box Number is Not Acceptable) 1211 MILLER ST. **ORANGE PARK FL 32067-0298** 83 84 City 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE LONG, HAROLD A CHAIRMA 1.2 NAME NAME 1441 MANOTAK AVE, APT. 1103 1.3 STREET ADDRESS STREET ADDRESS JÁCKSONVILLE FL 1.4 CTY-ST-ZIP CITY-ST-ZIP DELETE Change noilit bA TITLE 2.1 TITLE SQUIRE, ERNEST MINISTE 2.2 NAME NAME 2330 EGREMONT DRIVE 2.3 STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition Change TITLE 3.1 TITLE **DENNIS, ANTHONY** 3.2 NAME NAME JACKSON 1412 SOUTH MCDUFF AVE. 3.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32205 CITY-ST-ZIP a.4. City-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE SMITH, EUGENE 4. 2 NAME NAME 1037 MILLER STREET 4.3 STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** 4.4 CITY-ST-ZIP CITY-ST-ZIP MA Rett JE TITLE 5.1 TITLE Change Addition SMITH, GERALD F William NAME 5.2 NAME TO MAFFEH JO. 404 AQUARIUS CONCOURSE 2623 Poseus of LT 26 23 Rose 5.3 STREET ADDRESS wood co STREET ADDRESS PARK EL **ORANGE PARK FL 32073** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE Change STEWART, LONNIE ELDERS NAME 6.2 NAME 2725 LAURA ST. STREET ADDRESS 6.3 STREET ADDRESS

6.4 CffY-ST-ZiP

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 12 if changed, or of an attachment with an address.

14. I do 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

n attachment with an address.