FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

SLOTT, ARNOLD H

SIGNATURE:

334 EAST DUVAL STREET

12236 MANDARIN RD

JACKSONVILLE FL 32223

Suite, Apt. #, etc.

City & State

Zip

N9400002295 (3)

29

CHURCH OF OUR SAVIOUR FOUNDATION, INC.

Country

9. Name and Address of Current Registered Agent

25

JACKSO	NVILLE FL 32202		83	1						1
			84	City	,		FL	85 Zip	Code	1
office or r	to the provisions of Sections 617.0502 and 61 egistered agent, or both, in the State of Florida m familiar with, and accept the obligations of,	 Such change was authorities 	rized b	v the c	ned corporation su corporation's boar	ubmits this statemen rd of directors. I here	t for the purpose of aby accept the appo	changing i sintment as	ts registered registered	
SIGNATURE ,	·						OATE			
	Signature, typed or printed name of registered agent and title if			gent signa	ature required when rein	nstating) DITIONS/CHANGES		DIRECTOR	2S IN 12	(10/97)
2.	OFFICERS AND DIREC	T DELETE	13.		ADI.	ORTONASCHARIGES	RO OFFICENS AND	Change	Addition	lò
TLE	D DODRING GEODGE W	L DECEIE	1.1 TITLE		İ			ondingo		
AME	ROBBINS, GEORGE W		1.2 NAME		ļ					CR2E037
TREET ADDRESS	12550 MANDARIN ROAD		1.3 STREE	T ADDRE	SS					2E
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY - :	ST-ZIP				Change	Addition	胀
ITLE	DST	DELETE	2.1 TIFLE					Change	L. AGDIIIOII	~
AME	atkinson, mark w		2.2 NAME							
TREET ADURESS	1337 RIVER PLACE DR		2.3 STREE	T AUDRE	SS					1
CITY-ST-ZIP	JACKSONVILLE FL 32223		2. 4 CITY -	ST - ZIP	ŀ				Call 4 distribution	1
IILE	D ~	DELETE	3.1 IIILE					Change	Addition	
AME	HOVEY, HERBERT S JR		3.2 NAME	·						İ
TREET ADDRESS	11670 MANDARIN RD	i	3.3 STREET	T ADURE:	ss					
DIY-ST-ZIP	JACKSONVILLE FL 32223		3.4. CITY-	ST-ZIP		,			11.00	-
ITLE	DP	DELETE	4.1 TITLE					Change	Addition	
IAME	SLOTT, ARNOLD H		4. 2 NAME				•			
TREET ADDRESS	2862 SPANISH COVE TRAIL		4.3 STREET	T ADDRES	ss					1
ITY-ST-ZIP	JACKSONVILLE FL 32257	i.	4,4 CATY - S	ST-ZIP					77.55	ļ
ITLE	D	DELETE	5.1 TITLE				,	Change	Addition	
AME	LUNSFORD, JACQUELINE R		5.2 NAME							
TREET ADDRESS	3538 EQUESTRIAN CT		5.3 STREET	T ADDRES	ss					
ITY-ST-ZIP	JACKSONVILLE FL 32223	i	5.4 CITY - S	ST-ZIP						
ITLE	D	DELETE	6.1 TITLE					Change	Addition	1
AME	O'STEEN, RAYMOND M		6.2 NAME		1					
TREET ADDRESS	12675 MANDARIN RD		6.3 STREET	T ADDRES	ss					
	JACKSONVILLE EL 32223		64 CITY - S	ST - 71P	į					
ITY-ST-ZIP 4. Lhereby C		ata an and assaults, for the	04000	tion of	tated in Section 1	19.07(3)(i), Florida S	latutes. I further cer	ily that the	information	}
	ertify that the information supplied with this till on this annual report or suppliemental annual director of the corporation he receiver or tri									1
officer or of Block 12 of	director of the corporation . , he receiver or tri or Block 13 if changed or air attachment w	ith a	DIG IIIS	ishour	as required by O	maple of the foliation		,		

May 13, 1999 8:00 am Secretary of State

05-13-1999 90006 046 ****61.25

ATION, INC.										
			1				11			
Mailing Address			- '							
Mailing Address										
12236 MANDARIN RD JACKSONVILLE FL 32223				3. Date Incorporated or Qualified 05/04/1994						
				4. FEI Number App 59-3244052 Not						
2a. Mailing Address C/O Arnold H. Slo 26 334 East Duval Street				Certificate of Status Desired			Additional equired			
Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
City & State Jacksonville, FL 32202				7. Is this nonprofit corporation a homeowners association? Yes No						
Zip Country				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No						
egistered Agent			10.	Name and Address of New R	legistered A	gent				
	81	Name								
	82	Street Addre	ess (P.	O. Box Number is Not Accepta	able)					
	83									
84 City					FL	85 Zip	Code			
d 617,1508, Florida Statutes, lorida. Such change was auth is of, Section 617,0503, Florid	norized b	y the corporati	oration ion's bo	submits this statement for the pard of directors. I hereby acce	purpose of o ept the appo	changing it intment as	s registered registered			
d title if applicable (NOTE: B	egistered Ag	ent signature require	ed when re	einstating)	DATE					
RECTORS	13.		Αl	DOITIONS/CHANGES TO OFF	ICERS AND					
☐ DELETE	1.1 TITLE	İ		•	L	Change	Addition			
	1.2 NAME	-								
		T ADDRESS								
1.4 CITY-ST-ZIP DELETE 2.1 TIFLE			_		Change	Addition				
	2.1 TITLE 2.2 NAME				,					
		I ADDRESS								
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DELETE 3.1 TITLE					[Charige	- Addition			
	3.2 NAME	• •								
	3.3 STREE	ADURESS								
	3.4. CITY-	SY-ZIP								
☐ DELETE	4.1 TITLE				L	Change	Addition			
	4. 2 NAME									
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	4.4 CITY -	ST-ZIP			_r	T 01	1 delition			
☐ DELETE	5.1 TITLE				ī	Change	☐ Addition			
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<u>-</u>	5.4 CITY - S	ST-ZIP				Change	Addition			
☐ DELETE	6.1 TITLE				Ĺ	Change				
	6.2 NAME									
	6.3 STREET	ADDRESS								

(904)353-0033