4-30-970- 5928 -c

FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1997**		FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

FILED
Apr 30 1997 8:00am
Secretary of State

DOCUMENT # N94000003696 (1)
1. Corporation Name

ALL SAINTS INTERDENOMINATIONAL CHURCH, INC.

Principal Place of Business	Mailing Address
9208 BOLTON AVE. HUDSON FL 34667-3737	8316 GALLUP RD. SPRING HILL FL 34606-4542

3. Date Incorporated or Qualified 07/26/1994	3a. Date of Last Report 02/08/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-3256945	Applied For / Not Applicable
21 4518 15th Ave. N	26 4518 15th Ave N.		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23 St. Petersburg, FL	City & State 28 St.Petersburg, FL	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 33713	Country 25 Pinellas	Zip 29 33713	Country 30 Pinellas	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GUYER, JOHN J 8316 GALLUP RD. SPRING HILL FL 34608	81 Name John J. Guyer 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 4518 15th Ave N. St. Petersburg FL 85 Zip Code 33713

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: John J. Guyer _(signature)_   DATE 4/14/97
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P/D NAME GUYER, JOHN J STREET ADDRESS 8316 GALLUP RD. CITY-ST-ZIP SPRING HILL FL 34608	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP — P/D Guyer, John J 4518 15th Ave N St. Petersburg FL 33713 ☒ Change ☐ Addition
TITLE V/D NAME MUSOLF, GORDON M STREET ADDRESS 8316 GALLUP RD. CITY-ST-ZIP SPRING HILL FL 34608	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP — V/D Musolf, Gordon M 4518 15th Ave N St. Petersburg FL 33713 ☐ Change ☐ Addition
TITLE ST/D NAME OLSON, GLORIA STREET ADDRESS 6257 SWAN LANE CITY-ST-ZIP SPRING HILL FL 34608	☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP — ST/D Alvin Williams 3850 9th Ave S. St. Petersburg FL 33712 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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: John J. Guyer _(signature)_   4/14/97   813-323-4675
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone # 0066470

CR2E037 (9/96)