FILE NOW: FILING FEE IS \$61.25

Mailing Address

% WILLIE G. WOOD. PASTOR

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

% WILLIE G. WOOD. PASTOR



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400006019 (3) 1. Corporation Name

BIBLEWAY CHURCH OF GOD IN CHRIST OF OAK HILL, IN C.

OAK HILL FL 3		281 FLAMINGO HD. OAK HILL FL 32759-9317							
					3. Date Incorporated or Qualified 3a. Date of Las 01/31/				
	ace of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21	#	26				59-3301281			ot Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
City & State		27						Fee Re	equired
·	,	City & State				6. Election Campaign Financing			May Be
23 Zip	Country	28	T 00	untry		Trust Fund Contribution		Added t	
24	25	 		untry		8. This corporation has liability for in			. 199.032,
24 [9. Name and Address of Curre	29 nt Registered Agent	30	Ţ		Florida Statutes 10. Name and Address of New Reg	Yes No		
				61	Name	TO. THE STATE AND ADDRESS OF THEM PIET	harolan vilai		
SWEET	BARBARA G								
	RTH DIXIE FREEWAY	B2 Street Add		Iress (P.O. Box Number is Not Acceptable	Θ)				
	YRNA BEACH FL 32168	83							
HEN OM	THINA DEACH IL 32100				i				
				84	City		FI. 85	1	Code
11. Pursuant t	a the provisions of Sections 617.050	02 and 617.1508, Florida Statut	tes, the a	above	-named cor	poration submits this statement for the po	urpose of char	noina it	s registered
office or re agent. I ar	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was pations of, Section 617.0503, Fl	authorize orida Sta	ed by stutes	the corpora	poration submits this statement for the pution's board of directors. I hereby accep	t the appointm	ient as	registered
SIGNATURE									
12.	Signature, typed or printed name of registered ag				nt signature requi	ired when reinstating)	DATE		
TITLE	ST OPPICERS AIN	DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC			
NAME	SMITH, T.K.							Change	Addition
	291 WOOD AVENUE			NAME					
STREET ADDRESS				1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	OAK HILL FL TP	☐ DELETE		CITY-S	í-ZIP	·			The Address
NAME	·· —			2.1 TITLE				Change	Addition
	PAYNE, SAMUEL		2.2 NAME						
STREET ADDRESS	1008 WILKINS STREET			2.3 STREET ADDRESS					
CITY - ST - ZIP	NEW SMYRNA BEACH FL			2. 4 CITY-ST-ZIP					T-1 4 1 100
TITLE	TAS DELETE			3.1 TITLE			ш	Change	Addition
NAME	PAYNE, CHRISTINE	·		3.2 NAME					
STREET ADDRESS	1008 WILKINS STREET NEW SMYRNA BEACH FL		3.3 STREET						
CITY-ST-ZIP	T THE TENT OF THE	DELETE		CITY-S	T-ZiP			· · · · · ·	- A - C- 201
TITLE	WOOD, WILLIE G		4.1 7				ا لــا	Change	Addition
NAME	281 FLAMINGO ROAD			NAME					
STREET ADDRESS	OAK HILL FL 32759		4.3 STREET		· · · ·				
CITY-ST-ZIP TITLE	UAN HILL FL 32/39	DELETE	4.4 CiTY - S		- ZIP		· · ·	·····	1.000.00
								Change	Addition
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	_	HY-SI	- ZIP			16	1,100
TITLE		☐ DELETE	6.1 T					Change	Addition
NAME			6.2 N						
STREET ADDRESS			6.3 \$	IREET	ADDRESS				

14. I do hereby certify that the information supplied with this filling 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