

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$305)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
300001545753
-07/25/95--01097--021
*****130.00 *****130.00
DO NOT WRITE IN THIS SPACE

DOCUMENT # N94000006109 (2)

TRUE FELLOWSHIP SOUL SAVING STATION MINISTRIES,
INC.

Principal Place of Business		Mailing Address		3. Date incorporated or Qualified		3a. Date of Last Report	
8521 SOUTH HAMPTON DRIVE MIRAMAR FL 33025		8521 SOUTH HAMPTON DRIVE MIRAMAR FL 33025		12/12/1994			
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 AS Above		26 AS Above		65-0539609		Not Applicable	
22 State Apt # etc		27 State Apt # etc		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election of Corporate Form and Fiscal Year (check one)		\$5.00 May Be Added to Fees	
24 Zip		29 Zip		7. Nonprofit with IRS 501(c)(3) Tax Exempt Status		FILING FEE IS \$61.25	
25 Country		30 Country		8. This corporation has liability for intangible tax under s. 199 (3)(2), Florida Statutes		Yes ☐ No ☐	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DARRINGTON, DELORES 337 S.W. 15TH STREET DANIA FL 33004				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 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.				12. Signature of Registered Agent (Typed Name of Registered Agent and Title in parentheses)			
SIGNATURE: <i>Delores Darrington</i>				DATE: 6/19/95			
12. OFFICERS AND DIRECTORS				13. ADDITIONAL CHANGES TO THE REGISTERED OFFICE OR AGENT			
12.1 NAME: President + Founder, PASTOR T MYRTIS ARMSTRONG				13.1 TITLE: ☐ Change ☐ Addition			
12.2 STREET ADDRESS: 8521 So. Hampton Drive				13.2 NAME: 300001545753			
12.3 CITY, ST, ZIP: MIRAMAR, FL 33025				13.3 STREET ADDRESS: -07/25/95--01097--022			
12.4 TITLE: VP - D				13.4 CITY, ST, ZIP: *****8.75 *****8.75			
12.5 NAME: Benjamin Boykin				13.5 TITLE: ☐ Change ☐ Addition			
12.6 STREET ADDRESS: 8521 So. Hampton Drive				13.6 NAME: 23 STREET ADDRESS			
12.7 CITY, ST, ZIP: MIRAMAR, FL 33025				13.7 CITY, ST, ZIP: 24 CITY, ST, ZIP			
12.8 TITLE: Sec. / TREASURER - D				13.8 TITLE: ☐ Change ☐ Addition			
12.9 NAME: Sharon Boykin				13.9 NAME: 32 NAME			
12.10 STREET ADDRESS: 8521 So. Hampton Drive				13.10 STREET ADDRESS: 13 STREET ADDRESS			
12.11 CITY, ST, ZIP: MIRAMAR, FL 33025				13.11 CITY, ST, ZIP: 14 CITY, ST, ZIP			
12.12 TITLE: R.A. Sec. - D				13.12 TITLE: ☐ Change ☐ Addition			
12.13 NAME: Delores DARRINGTON				13.13 NAME: 41 NAME			
12.14 STREET ADDRESS: 337 SW 15 ST.				13.14 STREET ADDRESS: 42 STREET ADDRESS			
12.15 CITY, ST, ZIP: DANIA, FL 33004				13.15 CITY, ST, ZIP: 43 CITY, ST, ZIP			
12.16 TITLE:				13.16 TITLE: ☐ Change ☐ Addition			
12.17 NAME:				13.17 NAME: 51 NAME			
12.18 STREET ADDRESS:				13.18 STREET ADDRESS: 52 NAME			
12.19 CITY, ST, ZIP:				13.19 CITY, ST, ZIP: 53 STREET ADDRESS			
12.20 TITLE:				13.20 CITY, ST, ZIP: 54 CITY, ST, ZIP			
12.21 NAME:				13.21 NAME: 55 NAME			
12.22 STREET ADDRESS:				13.22 STREET ADDRESS: 56 STREET ADDRESS			
12.23 CITY, ST, ZIP:				13.23 CITY, ST, ZIP: 57 CITY, ST, ZIP			
12.24 TITLE:				13.24 TITLE: ☐ Change ☐ Addition			
12.25 NAME:				13.25 NAME: 61 NAME			
12.26 STREET ADDRESS:				13.26 STREET ADDRESS: 62 STREET ADDRESS			
12.27 CITY, ST, ZIP:				13.27 CITY, ST, ZIP: 63 CITY, ST, ZIP			
12.28 TITLE:				13.28 TITLE: ☐ Change ☐ Addition			
12.29 NAME:				13.29 NAME: 64 NAME			
12.30 STREET ADDRESS:				13.30 STREET ADDRESS: 65 STREET ADDRESS			
12.31 CITY, ST, ZIP:				13.31 CITY, ST, ZIP: 66 CITY, ST, ZIP			
12.32 TITLE:				13.32 TITLE: ☐ Change ☐ Addition			
12.33 NAME:				13.33 NAME: 67 NAME			
12.34 STREET ADDRESS:				13.34 STREET ADDRESS: 68 STREET ADDRESS			
12.35 CITY, ST, ZIP:				13.35 CITY, ST, ZIP: 69 CITY, ST, ZIP			
12.36 TITLE:				13.36 TITLE: ☐ Change ☐ Addition			
12.37 NAME:				13.37 NAME: 71 NAME			
12.38 STREET ADDRESS:				13.38 STREET ADDRESS: 72 STREET ADDRESS			
12.39 CITY, ST, ZIP:				13.39 CITY, ST, ZIP: 73 CITY, ST, ZIP			
12.40 TITLE:				13.40 TITLE: ☐ Change ☐ Addition			
12.41 NAME:				13.41 NAME: 74 NAME			
12.42 STREET ADDRESS:				13.42 STREET ADDRESS: 75 STREET ADDRESS			
12.43 CITY, ST, ZIP:				13.43 CITY, ST, ZIP: 76 CITY, ST, ZIP			
12.44 TITLE:				13.44 TITLE: ☐ Change ☐ Addition			
12.45 NAME:				13.45 NAME: 77 NAME			
12.46 STREET ADDRESS:				13.46 STREET ADDRESS: 78 STREET ADDRESS			
12.47 CITY, ST, ZIP:				13.47 CITY, ST, ZIP: 79 CITY, ST, ZIP			
12.48 TITLE:				13.48 TITLE: ☐ Change ☐ Addition			
12.49 NAME:				13.49 NAME: 81 NAME			
12.50 STREET ADDRESS:				13.50 STREET ADDRESS: 82 STREET ADDRESS			
12.51 CITY, ST, ZIP:				13.51 CITY, ST, ZIP: 83 CITY, ST, ZIP			
12.52 TITLE:				13.52 TITLE: ☐ Change ☐ Addition			
12.53 NAME:				13.53 NAME: 84 NAME			
12.54 STREET ADDRESS:				13.54 STREET ADDRESS: 85 STREET ADDRESS			
12.55 CITY, ST, ZIP:				13.55 CITY, ST, ZIP: 86 CITY, ST, ZIP			
12.56 TITLE:				13.56 TITLE: ☐ Change ☐ Addition			
12.57 NAME:				13.57 NAME: 87 NAME			
12.58 STREET ADDRESS:				13.58 STREET ADDRESS: 88 STREET ADDRESS			
12.59 CITY, ST, ZIP:				13.59 CITY, ST, ZIP: 89 CITY, ST, ZIP			
12.60 TITLE:				13.60 TITLE: ☐ Change ☐ Addition			
12.61 NAME:				13.61 NAME: 91 NAME			
12.62 STREET ADDRESS:				13.62 STREET ADDRESS: 92 STREET ADDRESS			
12.63 CITY, ST, ZIP:				13.63 CITY, ST, ZIP: 93 CITY, ST, ZIP			
12.64 TITLE:				13.64 TITLE: ☐ Change ☐ Addition			
12.65 NAME:				13.65 NAME: 94 NAME			
12.66 STREET ADDRESS:				13.66 STREET ADDRESS: 95 STREET ADDRESS			
12.67 CITY, ST, ZIP:				13.67 CITY, ST, ZIP: 96 CITY, ST, ZIP			
12.68 TITLE:				13.68 TITLE: ☐ Change ☐ Addition			
12.69 NAME:				13.69 NAME: 97 NAME			
12.70 STREET ADDRESS:				13.70 STREET ADDRESS: 98 STREET ADDRESS			
12.71 CITY, ST, ZIP:				13.71 CITY, ST, ZIP: 99 CITY, ST, ZIP			
12.72 TITLE:				13.72 TITLE: ☐ Change ☐ Addition			
12.73 NAME:				13.73 NAME: 101 NAME			
12.74 STREET ADDRESS:				13.74 STREET ADDRESS: 102 STREET ADDRESS			
12.75 CITY, ST, ZIP:				13.75 CITY, ST, ZIP: 103 CITY, ST, ZIP			
12.76 TITLE:				13.76 TITLE: ☐ Change ☐ Addition			
12.77 NAME:				13.77 NAME: 104 NAME			
12.78 STREET ADDRESS:				13.78 STREET ADDRESS: 105 STREET ADDRESS			
12.79 CITY, ST, ZIP:				13.79 CITY, ST, ZIP: 106 CITY, ST, ZIP			
12.80 TITLE:				13.80 TITLE: ☐ Change ☐ Addition			
12.81 NAME:				13.81 NAME: 107 NAME			
12.82 STREET ADDRESS:				13.82 STREET ADDRESS: 108 STREET ADDRESS			
12.83 CITY, ST, ZIP:				13.83 CITY, ST, ZIP: 109 CITY, ST, ZIP			
12.84 TITLE:				13.84 TITLE: ☐ Change ☐ Addition			
12.85 NAME:				13.85 NAME: 111 NAME			
12.86 STREET ADDRESS:				13.86 STREET ADDRESS: 112 STREET ADDRESS			
12.87 CITY, ST, ZIP:				13.87 CITY, ST, ZIP: 113 CITY, ST, ZIP			
12.88 TITLE:				13.88 TITLE: ☐ Change ☐ Addition			
12.89 NAME:				13.89 NAME: 114 NAME			
12.90 STREET ADDRESS:				13.90 STREET ADDRESS: 115 STREET ADDRESS			
12.91 CITY, ST, ZIP:				13.91 CITY, ST, ZIP: 116 CITY, ST, ZIP			
12.92 TITLE:				13.92 TITLE: ☐ Change ☐ Addition			
12.93 NAME:				13.93 NAME: 117 NAME			
12.94 STREET ADDRESS:				13.94 STREET ADDRESS: 118 STREET ADDRESS			
12.95 CITY, ST, ZIP:				13.95 CITY, ST, ZIP: 119 CITY, ST, ZIP			
12.96 TITLE:				13.96 TITLE: ☐ Change ☐ Addition			
12.97 NAME:				13.97 NAME: 121 NAME			
12.98 STREET ADDRESS:				13.98 STREET ADDRESS: 122 STREET ADDRESS			
12.99 CITY, ST, ZIP:				13.99 CITY, ST, ZIP: 123 CITY, ST, ZIP			
12.100 TITLE:				13.100 TITLE: ☐ Change ☐ Addition			

SIGNATURE: *Delores Darrington Sec.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Delores Darrington

REMITTED BY MAY 1

6/19/95 (305)

CR2E037 (3/95)

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND

95 JUL 24 9:14

DOCUMENT # N94000006151 (4)

DREAM LAND CORPORATION

Principal Place of Business

Mailing Address

1112 W MAIN ST
APT J6
LEESBURG FL 34748

1112 W MAIN ST
APT J6
LEESBURG FL 34748

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/16/1994

3a. Date of Last Report
New

4. FEI Number

59-3293633

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 authority for intrastate tax under S. 195.022,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Same 1112 W. Main St.

26 Post Office Box 888

22 Site, Apt. #, etc.

27 Suite, Apt. #, etc.

23 APT J6

27 City & State

City & State

City & State

23 Leesburg, Florida

28 Fruitland Park, FL.

24 Zip

Country

29 Zip

30 Country

24 34748

25 Lake

29 34731

30 Lake

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRICE, JOSEPH T
1112 W MAIN ST
APT J6
LEESBURG FL 34748

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

Signature of the person who is the registered agent or officer of the corporation.

Signature of the person who is the registered agent or officer of the corporation.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1111
NAME PRICE, JOSEPH T
STREET ADDRESS P.O. BOX 491103 N/A
CITY, ST, ZIP LEESBURG FL 34749-1103

1112
NAME RUSSELL, THOMAS W
STREET ADDRESS 903 S 9 ST
CITY, ST, ZIP LEESBURG FL 34748

1113
NAME MITCHELL, CHARLES S
STREET ADDRESS 8399 COUNTY RD 243
CITY, ST, ZIP WILDWOOD FL 32785

1114
NAME OLIVEIRA, ANTONIO
STREET ADDRESS 13301 SW 110 PL
CITY, ST, ZIP DUNNELLON FL 32630

1115
NAME MC DEVITT, JOHN
STREET ADDRESS 1705 E SCHWARTZ BLVD
CITY, ST, ZIP LADY LAKE FL 32519

1116
NAME GRIFFIS, JOHN W
STREET ADDRESS 149 TERA DR
CITY, ST, ZIP TAVARES FL 32778

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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 110.07(9)(b), 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 prepare this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Joseph T Price

April 24 1995

(904) 748-0629

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR