FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500000795 (3)

FOUNDATIONS FOR BIBLICAL LEADERSHIP, INC.

3999 CHICORA WOOD PLACE

1880 MELROSE PLANTATION DR

1614 GROVE AVE., APT. #16

JACKSONVILLE FL

ULLUM, THOMAS

JACKSONVILLE FL

KRUG, COIT

RICHMOND VA

THOMPSON, CHRIS

4533 SHELLY LN

Principal Place of Business Mailing Address								
1928 CRANE CT. 1928 CRANE CT. JACKSONVILLE FL 32259 JACKSONVILLE FL 32259						3. Date Incorporated or Qualified 02/16/1995 4. FEI Number Applied For		
						59-3304064 Not Applicable		
2. Principal I	Place of Business	2a. Mailing Address 26	⊢ , *		·	5. Certificate of Status Desired S8.75 Additional Fee Required		
Suite, Apt	•	Suite, Apt. #, etc.	27			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & Sta		City & State	28			7. Is this nonprofit corporation a homeowners association?		
Zip 24	Country 25	Zip 29	30 Cou	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes		
9. Name and Address of Current Registered Agent				81	Name	10. Name and Address of New Registered Agent		
WOULD MADO I				oi Name				
KRUG, MARC J			[82 Street Address (P.O. Box Number is Not Acceptable)				
1928 CRANE CT. JACKSONVILLE FL 32259			}	83				
JAONOONVILLE FL 32209			į					
				84	City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617,0502 and 617,0508, 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								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature require 12. OFFICERS AND DIRECTORS 13.					uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE			1.1 TIT	1 F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME	BRENT, JOHN		1.2 NA	_				
STREET ADDRESS	1928 MORNINGSIDE ST				VDDRESS			
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CIT					
TITLE	D	☐ DELETE		2.1 TITLE		Change Addition		
NAME	SCHERER, JOHN		2.2 NA	2.2 NAME				
STREET ADDRESS	1142 MOLOKAI RD		2.3 STREET AL		UDDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 2.		2. 4 Cl	TY-SI	-ZIP			
TITLE	S	DELETE	3.1 TITLE			Change Addition		
NAME	TURNER, THOMAS C 3.2		3.2 NA	ME				

CITY-ST-ZIP LAKE CHARLES LA

14. I 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 appears in Block 13 or Block 13 if changed of the an attachment with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

__! DELETE

☐ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

1/5/98 904-287-0098

32207

Sen Jose Blyd.

Change

Change

Addition

Addition

FILED

Jan 22 1998 8:00am

Secretary of State

CR2E037 (10/97)