

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000001937 (0)

1. Corporation Name

REPAIRERS OF THE BREACH MINISTRIES, INC.



Principal Place of Business

Mailing Address

2417 SANDY LANE
ORLANDO FL 32818

P.O. BOX 681834
ORLANDO FL 32868-1834

3. Date Incorporated or Qualified

04/24/1995

3a. Date of Last Report

N/A

2. Principal Place of Business

21 Same AS ABOVE

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-3312761

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

NO

☐

\$5.00 May Be
Added to Fees

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

AMERILAWYER
343 ALMERIA AVE.
CORAL GABLES FL 33134

81 Name

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

83

84 City

FL

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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME
P
HOLMES, WILLARD
STREET ADDRESS
2417 SANDY LANE
CITY-ST-ZIP
ORLANDO FL 32818

☐ DELETE

TITLE

NAME
~~Vice President~~
~~Si Henderson, St L~~
~~800 E Lucerne Terrace~~
STREET ADDRESS
CITY-ST-ZIP
Orlando, FL 32801 VOID

☐ DELETE

TITLE

NAME
~~Secretary/Treasurer/Dir.~~
~~Holmes, Sallie~~
~~2417 Sandy Lane~~
STREET ADDRESS
CITY-ST-ZIP
Orlando, FL 32818 VOID

☐ DELETE

TITLE

NAME
~~Chief Editor of Ministries Publications/Dir.~~
~~Brady, William SR.~~
STREET ADDRESS
CITY-ST-ZIP
Void

☐ DELETE

TITLE

NAME
~~Director~~
~~White, Thomas~~
STREET ADDRESS
CITY-ST-ZIP
Void

☐ DELETE

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Chief Editor of Publications/Dir.

Brady, William SR

VOID

Change

☒ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Director

White, Thomas

2673 Bent Willow Ct Circle

Orlando, FL 32808

☐ Change

☒ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Director

Brady, Bill

2673 Bent Willow Ct Circle

Orlando, FL 32808

☐ Change

☒ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

V/D

Henderson, Si L.

800 E. Lucerne Terrace

Orlando, FL 32801

☐ Change

☒ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

S/T/D

Holmes, Sallie

2417 Sandy Lane

Orlando, FL 32818

☐ Change

☒ Addition

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/96 (401) 578-2569

Date

Daytime Phone #

CR2E037 (12/95)