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Jul 01 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**



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  
**03/07/1996**

2. Principal Place of Business  
21 **2417 Sandy Lane**  
Suite, Apt. #, etc.

2a. Mailing Address  
26 **P.O. Box 681834**  
Suite, Apt. #, etc.

4. FEI Number  
**59-3312761**

Applied For  
Not Applicable

22 City & State  
23 **Orlando, Florida**

27 City & State  
28 **Orlando, Florida**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24 Zip **32818** 25 Country **USA**

29 Zip **32868-1834** 30 Country **USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current 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

10. Name and Address of New Registered Agent

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

TITLE **D** ☐ DELETE  
NAME **WHITE, THOMAS**  
STREET ADDRESS **2673 BENT WILLOW COURT CIRCLE**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **D** ☐ DELETE  
NAME **BRADY, BILL**  
STREET ADDRESS **2673 BENT WILLOW CT CIRCLE**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **VD** ☒ DELETE  
NAME **HENDERSON, SI L.**  
STREET ADDRESS **800 C. LUCERNE TERARCE**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **STD** ☐ DELETE  
NAME **HOLMES, SALLYE**  
STREET ADDRESS **2417 SANDY LANE**  
CITY-ST-ZIP **ORLANDO FL**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition  
1.2 NAME **White, Thomas**  
1.3 STREET ADDRESS **2673 Bent Willow Court Circle**  
1.4 CITY-ST-ZIP **Orlando, Florida**

2.1 TITLE **VP/D** ☒ Change ☐ Addition  
2.2 NAME **Holmes, Willard**  
2.3 STREET ADDRESS **2417 Sandy Lane**  
2.4 CITY-ST-ZIP **Orlando, Florida 32818**

3.1 TITLE **D** ☐ Change ☐ Addition  
3.2 NAME **Brady, Bill**  
3.3 STREET ADDRESS **2673 Bent Willow Court Circle**  
3.4 CITY-ST-ZIP **Orlando, Florida**

4.1 TITLE **STD** ☐ Change ☐ Addition  
4.2 NAME **Holmes, Sallye**  
4.3 STREET ADDRESS **2417 Sandy Lane**  
4.4 CITY-ST-ZIP **Orlando, Florida 32818**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 in an attachment with an address.

CR2E037 (9/96)