

FILE NOW: FILING FEE IS \$61.25

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| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|

DOCUMENT # **N9500000 3591**

1. Corporation Name  
**Sacred Heart Assembly of Saints, Inc.**

Principal Place of Business Mailing Address

**309-A Mabry St.  
Tallahassee, FL 32304**

2. Principal Place of Business 2a. Mailing Address

**21** Suite, Apt. #, etc. **26** Suite, Apt. #, etc.

**22** City & State **27** City & State

**23** Zip **28** Zip **24** Country **25** **29** **30** Country

3. Date Incorporated or Qualified

**July 28, 1995**

4. FEI Number

**59-3331303**

Applied For  
 Not Applicable

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

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

7. Is this nonprofit corporation a homeowners association?  Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**Hazel Lee Jenkins, Pastor-Director  
309-A Mabry St.  
Tallahassee, FL 32304**

10. Name and Address of New Registered Agent

**81** Name **82** Street Address (P.O. Box Number is Not Acceptable)  
**83**  
**84** City **85** Zip Code **FL**

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 reg stored agent and title if applicable

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

**Phillip LaVern Jenkins (D)**  
2308 South meridian St.  
Tallahassee, FL 32301

**Secretary/Treasurer (D)**  
Carla Bonita Bennett N/A  
P.O. Box 1248  
Quincy, FL 32358-1248

DELETE

DELETE

DELETE

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**Hazel Lee Jenkins Pastor-Director (D)**  
309-A Mabry St.  
Tallahassee, FL 32304

**Bertha Williams -CO- PASTOR (D)**  
2756 S. Sandalwood DR S.  
Tallahassee, FL 32310

**Dorothy Roberts Secretary (D)**  
2223 Hillside Rd., Treasurer  
Tallahassee, FL 32304

Change  Addition

Change  Addition

Change  Addition

Change  Addition

**8/4/98**

**400002504374**

**-04/29/98-01010--010**

**\*\*51-25**

14. I 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 on an attachment with an address.

SIGNATURE: **Hazel Jenkins Hazel Jenkins 4/24/98/8501574-9064**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E037 (10/97)