FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

97 APR -8 AM 11:56

DOCUMENT # N95000005755
1. Corporation Name
THE POTTER'S House OF Refuge CHange
That

SECRETARY OF STATE TALLAMASSEE, FLORIDA

THE	POTTER'S HOU	use of Re	Luge CHai	TÄLLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address					
				3. Date Incorporated or Qualified	3a. Date of Last Report
2 Principal P	lace of Business	2a. Majling Address		4. FEI Number	Applied For
21 1701	Hamilton St.	26 P.O. BOX 35	904	59.3365778	Not Applicable
Suite, Apt.		Suite Apt. #, etc.			CO 75 A-14951
22 Y AN	ramp City FIA.	27 Yanama Ci	M TA. 32401	5. Certificate of Status Desired	Fee Required
City & Stati	° (c:1)	City & State	,	6. Election Campaign Financing	\$5.00 May Be
23 <i>y au</i>	am A (City)	28		Trust Fund Contribution	Added to Fees
∷ገ ^ፈ ኞ ኋረ	10 2 25 USA.	Zip	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032,
24 30	9. Name and Address of Current F	<u> </u>	30]	10. Name and Address of New Rec	
			81 Name 1	Pacto 8 1.62 T	0:1
1701 Hamilton St. POWE SEAN KICKER WILL					
Street Address (P.O. Box Number is Not Acceptable)					
1701 Hamilton St. PanonA City FlA. Soust. 81 Name Property Street Address 83 170				1 Hamilton 8	4.
,	•		B4 City	7 7 10-1-1-77011 3	85 Zip Code
			17 00 12	amama City FIA	· 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 typod or printed name of registered agent and late it applicable (NOT). Registered Agent signature					DATE
12.	OFFICERS AND I	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	Brand of Directors Wilburn E. Richardson		1.2 NAME	romania (2) 1	36642
NAME STREET ADDRESS	1701 Hamilton Avenue		1.3 STREET ADDRESS	04/08/	9701083018
CITY-ST-ZIP		412-	1.4 CHY-SI-ZIP	*****	
TITLE	Board of Directors	DELETE	2.1 TiTLE		Change Addition
NAME		ardson	2.2 NAME		
STREET ADDRESS	1701 Hamilton Avenue		2 3 STHEEL ADDRESS		
CITY-ST-ZIP		รองเอ	2 4 City-St-ZiP		
TITLE	Board of Directors	DELETE	31711[[Change Addition
NAME	Mary H. Smith		3.2 NAME		Ì
STREET ADDRESS	22 North Monroe		3 3 STREET ADDRESS		
CITY-ST-ZIP	Portland, DR 97218		34 CITY-\$1-7IP		
TITLE	-	DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T or tr	4 4 CITY - ST - ZIP		
TITLE		DETH	5.1 TITLE		☐ Change ☐ Addition
NAME			5 ? NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.4 CHY+ST+ZiP 6.1 THUE	·	Change Addition
NAME			6.2 NAME		- Compression
STREET ADDRESS			6.3 STREFT ADDRESS		Musan
CITY-ST-ZIP			6.4 CRY-S1-ZIP	,	U04-X-4 1 1
14. Ldo heret	by certify that the information supplied w	ith this filing does not qualify	for the exemption stated	in Section 119.07(3)(i), Florida Statutes	I further certify that the
I am an of	n indicated on this annual report or sup ficer or director of the corporation or the p Block 12 or Block 13 itemanged, or or	e receiver or trustee empowe	red to execute this repor	my signalure shall have the same legal t as required by Chapter 617, Florida St	errect as it made under oath; that atutes; and that my name