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NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

May 14 1997 8:00am

Secretary of State

-05/27/97--01019--027

Secretary of State

DIVISION OF CORPORATIONS

1997

STREET ADDRESS

CHURCH OF REDEMPTION, INCORPORTE

			 		
Principal Place	e of Business , BOX 154	Mailing Address P. O. E	30x 84	4	
		PAMIL	A.C.O.		
CHM	ILLA, GEORGIA 31730	تر المرازات	31730	3. Date Incorporated or Qualified	3a. Date of Lest Report
2. Principal P	lace of Business	2a. Mailing Address	P-101	4. FEI Number	Applied For
21 / /	3, BUX 134	26 F. C. Suite. Apt. #, etc.	DOX 86	6 29-332482	Not Applicable \$8.75 Additional
22 Suite, Apr	#, etc. /	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	a Circu	6. Election Campaign Financing	\$5.00 May Be
23 (17/8)	OILLAS DEORGIA	28 CAM/LL	Country Country	Trust Fund Contribution 8. This corporation has liability for	Added to Fees
コヴノク	130 mitchell	303/730	BUITCHE		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	glatered Agent
TOHA	VALY F. RED	NICK	61 Name		, ,
8/7	AUDUNALE	Address (P.O. Box Number is Not Acceptat) (9)		
63 B3					
KOCK	LEDGE, HU	7. 32.45			lee Zo Codo
, , ,			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statute	s, the above-named	corporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changing its registered
agent La	egistered agent, or both, in the state of m familiar with, and accept the obligat	ions of, Section 617.0503, Flor	rida Statutes.	Claudit's board of bilectors. Frieldby 2000	A BID appointment as registered
SIGNATURE Standard: Spend or printed name of rogistered agest and little if applicable (NOTE: Registered Agent signature required when reinstalling) DATE					
12.	Signature, typico or printed name of registered agost OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TIDLE	PASTOR "I	DELETE DELETE	1.1 TITLE		Change Addition
NAMI	JOHNNY F. 7	réboick .	1.2 NAME		İ
STREET ADDRESS	710 1/2 W Z	nd AVENUE	1.3 STREET ADDRESS		
CHY-SI-ZP	ALBANY, GA	<u>. 31701 </u>	1.4 CITY-ST-ZIP		
TITLE	SENIOR DEA	CON LIGHTE	2.1 TITLE		Change Addition
NAME	FLEMMING F	REDDICK			
STREET ADDRESS			2.2 NAME		
	319 MANGO	AVENUE	2.3 STREET ADDRESS		
CHY-SI-ZIP TILLE	319 MANGO COCOA, FLOA	AVENUE UDA 32922	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	OUTREACH DIRE	C7DR Change
CHY-SI-ZIP TILLE NAME	319 MANGO COCOA, FLON DUTREACH DIN	AVENUE SUDA 32922 SECTURA DELETE	2.3 STREET ADDRESS	OUTREACH DIRE	CTOR Change Addition
TILLE	319 MANGO COCOA, FLOA	AVENUE SUDA 32922 RECTURA DELETE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	OUTREACH DIRE	
TITLE NAME	319 MANGO COCOA, FLON DUTREACH DIN SARAH LEWIS 901 B' STRE	AVENUE SUDA 32922 RECTURA DELETE SET RIDA 32922	2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME	OUTREACH DIRECTA MARY LEE CLA 607 WILLARD ALBANY, GA.	CTOR Change Addition Addition STREET 31701
TILLE NAME STREET AUDRESS	319 MANGO COCOA, FLON DUTREACH DIN SARAH LEWIS 901 B' STRE COCOA, FLO OLERK "D"	AVENUE 210A -32922 RECTON DELETE ET RIDA 32922	2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	OUTREACH DIRE MARY LEE CLA 607 WILLARD ALBANY, GA. CLERK "D"	CTOR Change
YILLE NAME STREET ADDRESS CHY-S1-ZIP TICLE NAME	319 MANGO COCOA, FLOI DUTREACH DIN SARAH LEWIS 901 B STRE COCOA, FLO	AVENUE 210A 32922 RECTON DELETE ET RIDA 32923 DELETE	2.3 STREET ADDRESS 2.4 CITY- ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	OUTREACH DIRE	CTOR Change
YILLE NAME STREET ADDRESS CITY-SE-ZIP TITLE NAME STREET ADDRESS	319 MANGO COCOA, FLON DUTREACH DIN SARAH LEWIS 901 B' STRE COCOA, FLO OLERK "D"	AVENUE PLOA -32922 RECTON DELETE RIDA 32922 DOLLETE LSON CIRCLE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	RT 3, BOX 165	CTOR Change
YILLE NAME STREET ADDRESS CITY-SE-ZIP TITLE NAME STREET ADDRESS CITY-SE-ZIP	319 MANGO COCOA, FLON COCOA, FLON SARAH LEWIS 901 B STRE COCOA, FLO OLERK "D" TAMMY L. WILL 3164 ARTHUR MELBOURNE, I	AVENUE 210A 32922 RECTURATE RIDA 32922 LSON CIRCLE F/A 32934	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	RT 3, BOX 165	CTOR Change Addition U.S. STREET 31701 AChange Addition LL 31730
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6.3 STREET ADDRESS

CHY-SI-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 on an attachment with an address.