


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Sep 10 1997 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001900 (7)

1. Corporation Name
GREATER PAYNE DEVELOPMENT AND ENRICHMENT CENTER, INC.

Principal Place of Business 1230 E. 23RD ST. SUITE 101 JACKSONVILLE FL 32206	Mailing Address 1230 E. 23RD ST. SUITE 101 JACKSONVILLE FL 32206
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
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3. Date Incorporated or Qualified 04/09/1996	3a. Date of Last Report
4. FEI Number 59-3379984	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

PARKER, AVA L
~~110 W. ADAMS ST.~~ **603 North Market Street**
~~SUITE 1814~~
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

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	P	<input type="checkbox"/> DELETE
NAME	WORMACK, REV. W.L.	
STREET ADDRESS	1356 HIGH PLAINS DR., S	
CITY-ST-ZIP	JACKSONVILLE FL 32211	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Dempsey, Donald	
1.3 STREET ADDRESS	9765 Southbrook Drive, #3405	
1.4 CITY-ST-ZIP	Jacksonville, FL 32256	
2.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Sloan, Carina	
2.3 STREET ADDRESS	8787 Southside Blvd. #1306	
2.4 CITY-ST-ZIP	Jacksonville, FL 32256	
3.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Wormack, Stephanie	
3.3 STREET ADDRESS	672 1/2 Chestnut Street	
3.4 CITY-ST-ZIP	Jacksonville, FL 32205	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Dempsey, Ike	
4.3 STREET ADDRESS	761 Chestnut Oak Dr. S.	
4.4 CITY-ST-ZIP	Jacksonville, FL 32218	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Fields, Harry	
5.3 STREET ADDRESS	1207 Florida Avenue	
5.4 CITY-ST-ZIP	Jacksonville, FL 32206	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Spencer, John	
6.3 STREET ADDRESS	1517 East 21st Street	
6.4 CITY-ST-ZIP	Jacksonville, FL 32206	

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.

CFR2E037 (4/97)



Greater Payne Development And Enrichment Center

1230 East 23rd Street, Suite 101, Jacksonville, Florida 32206 (904) 355-6015 Fax (904) 353-7566

Rev. Willie Wormack, President

Mr. Donald Dempsey, II, Vice-President

ADDITIONAL OFFICERS

S
Adams, Carolyn
3505 Franklin Street
Jacksonville, FL 32206

(Addition)

