

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000004149

1. Corporation Name

BREAD OF LIFE MINISTRIES OF AMERICA, INC.

Principal Place of Business

**8801 BRIXTON COURT
JACKSONVILLE FL 32244**

Mailing Address

**P.O. BOX 12661
JACKSONVILLE FL 32209**

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90052 041 ****61.25

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2. Principal Place of Business

21 2328 San Diego Rd.
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

07/17/1998

4. FEI Number

59-3542728

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

City & State
23 Jacksonville, Florida

City & State

28

Zip Country
24 32207 25 USA

Zip Country
29 30

9. Name and Address of Current Registered Agent

**JENNINGS, VERNITA
8801 BRIXTON COURT
JACKSONVILLE FL 32244**

10. Name and Address of New Registered Agent

81 Name

Vernita Jennings

82 Street Address (P.O. Box Number is Not Acceptable)

586 Golden Links Dr.

83

Orange Park,

84 City

Orange Park,

FL

85 Zip Code
32073

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 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JENNINGS, VERNITA
P.O. BOX 12661 N/A
JACKSONVILLE FL 32209**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WHITE, AUDREY
P.O. BOX 12661 N/A
JACKSONVILLE FL 32209**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WHITE, AUGENA
P.O. BOX 12661 N/A
JACKSONVILLE FL 32209**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ROBINSON, COURTNEY
P.O. BOX 12661 N/A
JACKSONVILLE FL 32209**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COOK, DONNA
P.O. BOX 12661 N/A
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME ☐ Change ☐ Addition

1.3 STREET ADDRESS ☐ Change ☐ Addition

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME ☐ Change ☐ Addition

3.3 STREET ADDRESS ☐ Change ☐ Addition

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME ☐ Change ☐ Addition

4.3 STREET ADDRESS ☐ Change ☐ Addition

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME ☐ Change ☐ Addition

5.3 STREET ADDRESS ☐ Change ☐ Addition

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

SIGNATURE:

Vernita Jennings
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/99
Date

630-6900
Daytime Phone #

CR2E037 (11/98)