## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.) FILED NONPROFIT ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham 96 JUL 25 AM 10: 52 ANNUAL REPORT Secretary of State SECRETARY OF STATE **DIVISION OF CORPORATIONS** 1996 TALLAHASSEE, FLORIDA P17360 (9)DOCUMENT # THE BIBLICAL HOUSE OF GOD, HOLINESS CHURCH, INC. Principal Place of Business Mailing Address 1018 MEADOW STREET 1018 MEADOW STREET PO BOX 1021 PO BOX 1021 NEW BERN NC 28560 NEW BERN NC 28560 3a. Date of Last Report 3. Date Incorporated or Qualified 12/23/1987 04/28/1995 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 56-1571892 Not Applicable 3819 Speedway Circle P.O. Box 6863 Suite, Apt. #, etc \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required P.O. Box 6863 City & State City & State 6. Election Campaign Financing \$5.00 May Be Knoxville, Tennessee <u>Knoxville, Tennessee</u> Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No 24 37914 37914 Florida Statutes 30 Knox Knox 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name WILLIAMS, DELORIS Street Address (P.O. Box Number is Not Acceptable) 82 2567 15TH AVE. SOUTH 83 ST. PETERSBURG FL 33712 84 City Zip Code 85 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. July 19, 1996 ACC Agent and sign approbable LANGE Registered Agent signature required when re-estating) SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/E) 13. 12. PRESIDENT / D DELETÉ Change 1 1 TITLE TITLE Bishop Gary E. Wright JACKSON, BISHOP A. NAME 1.2 NAME CR2E037 1018 MEADOW ST. 3924 Kenilworth Lane STREET ADDRESS 13 STREET ADDRESS **NEW BERN NC** Knoxville, TN 37914 14 CiTY-ST-ZIP CITY - ST-ZIP DELETE Change Addition 21 TITLE TITLE MIDOLETON, LEROY J 2 2 NAME NAME 4915 AMBERWOOD LN 2.3 STREET ADDRESS STREET ADDRESS CHARLESTON SC 2 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE VD 31 TITLE NAME WILLIAMS, D. 3.2 NAME STREET ADDRESS 2567 15TH AVE SOUTH 3.3 STREET ADDRESS ST. PETERSBURG FL 3 4. CITY - ST-ZIP CITY-ST-ZIP **K** DELETE Change Addition 4.1 TITLE TITLE Secretary / D 4 2 NAME Trula R. Jones HAMMOND, TERRY NAME 2567 15TH AVE SOUTH 4 3 STREET ADDRESS 1831 Meadowland Lane, #5A STREET ADDRESS Louisville, TN ST. PETERSBURG FL 33712 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5 1 TITLE TITLE 5.2 NAME NAME HEYWARD, ARCHIE STREET ADDRESS 1413 WHITE DR. 5.3 STREET ADDRESS CHARLESTON SC 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6 1 TITLE TITLE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 direction 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

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

SIGNATURE:

NAME

STREET ADORESS

July 19, 1996 (423)546-0873