FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000071196 (4)

PEOPLE, FAITH AND PROFIT, INC.

FILED Mar 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				, respirate un com saert geiet breit befeit ibade tibbl (1912 1211) Eith 1821	
1 9650-5 SAN JOSE BLVD. 9650-5 SAN JOSE BLVD. JACKSONVILLE FL 32257 JACKSONVILLE FL 32257					
anonochi i	LLE FL 3225/	JACKSONVILLE PL 32257	JACKSONVILLE FL 32257		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
1.					08/15/1997
<u> </u>		2a. Mailing Address	2a. Mailing Address		4. FEI Number Applied For
21		26			59 - 346594 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Certificate of Status Desired \$8.75 Additional
City & State		27			Fee Required
23		City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	28	Country	,	Trust Fund Contribution Added to Fees
24	25	<u> </u>	30		This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 	9. Name and Address of Cui				10. Name and Address of New Registered Agent
н	ARRIS, KELLY		81	Name	
9850-5 SAN JOSE BLVD.			82	Ctroot	Address (D.O. Boy Number in Not Assessed
	ACKSONVILLE FL 32257		92	Street	at Address (P.O. Box Number is Not Acceptable)
			83		
•			84	City	85 Zip Code
11 Pursuant	to the provisions of Sections 607	0502 and 607 1509 Florida Statistics	a the show		FL 69 217 COOR
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PRESIdent	DELETE	1.1 TITLE		Treasurer Change Addition
NAME	ME Kelly HARRIS REFIADDRESS 9850-5 SAN JOSE BIVD		1.2 NAME		Stephen C. Toost
STREET ADDRESS	STREET ADDRESS 9850-5 SAN JOSE BIV D		1.3 STREET	ADDRESS	3410 Kori Road
CITY-ST-ZIP	JACKSINVILLE,		1.4 CITY-S	T-ZIP	Jacksonville Fl 33257
TITLE	RObiN SORENSEN	☐ DELETE	2.1 TITLE		Change Addition
NAME	AGENET CAN/ITOSE	Kirn	2.2 NAME		4.2
	- Leave 116 Pl		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	JACKSVIVI		2.4 CITY-S	T- ZIP	
NAME		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME	1000000	.
CITY-ST-ZIP			3.3 STREET		
TITLE		DELETE	3.4. CITY - S 4.1 TITLE	1-211	☐ Change ☐ Addition
NAME			4. 2 NAME		Compt Number
STREET ADDRESS			4.3 STREET	ADDRESS	
City-St-Zip			4.4 CITY-S		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST	- ZIP	
TITLE	· · · - · · · · · · · · · · · · · · · ·	DELETE	61 TITLE	• • • • • • •	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	address	
CITY-ST-ZIP			6.4 CITY-SI		
14. I hereby o	certify that the information supplied	with this filing does not qualify for	the exempt	on state	ted 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

alche.