

FILE NOW: FILING FEE IS \$61.25

FILED

May 07 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 748373 (8)**

1. Corporation Name  
**APOSTOLIC LIFE, INC.**



Principal Place of Business <b>4070 OLD COTTONDALE RD MARIANNA FL 32447 US</b>	Mailing Address <b>PO BOX 1025 MARIANNA FL 32446-1025</b>
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3. Date Incorporated or Qualified <b>08/06/1979</b>	3a. Date of Last Report <b>04/24/1996</b>
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2. Principal Place of Business 21 <b>4070 Old Cottondale Rd</b>	2a. Mailing Address 26 <b>4070 Old Cottondale Rd</b>
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State <b>Marianna Fla</b>	28 City & State <b>Marianna Fla.</b>
24 Zip <b>32448</b>	25 Country <b>Jackson</b>
29 Zip <b>32448</b>	30 Country <b>Jackson</b>

4. FEI Number <b>59-2923479</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BIGGS, ALLEN REV  
4070 OLD COTTONDALE ROAD  
MARIANNA FL 32447**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code <b>FL 32448</b>

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 **Rev. Allen Biggs IPC.** **Rev. Allen Biggs** **4/28-97**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE	
TITLE	<b>PC</b>		
NAME	<b>BIGGS, ALLEN</b>		
STREET ADDRESS	<b>4070 OLD COTTONDALE ROAD</b>		
CITY-ST-ZIP	<b>MARIANNA FL</b>		
TITLE	<b>D</b>		
NAME	<b>BIGGS, HAROLD D</b>		
STREET ADDRESS	<b>1423 HWY 73 SOUTH</b>		
CITY-ST-ZIP	<b>MARIANNA FL 32446</b>		
TITLE	<b>D</b>		
NAME	<b>CAPPS, RODNEY</b>		
STREET ADDRESS	<b>1830 MILL RD</b>		
CITY-ST-ZIP	<b>COTTONDALE FL</b>		
TITLE	<b>D</b>		
NAME	<b>BAKER, BO</b>		
STREET ADDRESS	<b>RT 7 BOX 130</b>		
CITY-ST-ZIP	<b>CHIPLEY FL 32428</b>		
TITLE	<b>STD</b>		
NAME	<b>BIGGS, WANDA</b>		
STREET ADDRESS	<b>4070 OLD COTTONDALE RD</b>		
CITY-ST-ZIP	<b>MARIANNA FL</b>		
TITLE	<b>D</b>		
NAME	<b>BIGGS, KATHLEEN</b>		
STREET ADDRESS	<b>1423 HWY 73 SOUTH</b>		
CITY-ST-ZIP	<b>MARIANNA FL 32446</b>		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
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			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-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.

SIGNATURE: **Rev. Allen Biggs** **Rev. Allen Biggs** **4/28/97 (904) 482-8720**

CR2E037 (9/96)