

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 PM 12:17

DOCUMENT # N94000004083 (1)

1. Corporation Name

ARISE & SHINE EVANGELISTIC ASSOCIATION, INC.

Principal Place of Business
3360 S.W. County Road 769
ARCADIA FL 33821

Mailing Address
3360 S.W. County Road 769
ARCADIA FL 33821

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/18/1994	2a. Date of Last Report First Report
4. FEI Number 65-0524235	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status Pending ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

FLEMING, EDWARD P
4300 BAYOU BLVD SUITE 12 & 13
PENSACOLA FL 32503-1009

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL
86 Zip Code

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 resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☒ Change ☐ Addition
NAME	WOODS, DIRK	12 NAME	D
STREET ADDRESS	10010 WANDA DRIVE	13 STREET ADDRESS	18 MALAM GARDENS, POPLAR
CITY - ST - ZIP	PENASCOLA FL 32514	14 CITY - ST - ZIP	LONDON E140TR, ENGLAND
TITLE	VD	21 TITLE	☒ Change ☐ Addition
NAME	SAME, STEVE	22 NAME	D
STREET ADDRESS	10010 WANDA DRIVE	23 STREET ADDRESS	18 MALAM GARDENS, POPLAR
CITY - ST - ZIP	PENASCOLA FL 32514	24 CITY - ST - ZIP	LONDON E140TR ENGLAND
TITLE	SD	31 TITLE	☒ Change ☐ Addition
NAME	RANDALL, MARK	32 NAME	D
STREET ADDRESS	10010 WANDA DRIVE	33 STREET ADDRESS	
CITY - ST - ZIP	PENASCOLA FL 32514	34 CITY - ST - ZIP	
TITLE	TD	41 TITLE	☒ Change ☐ Addition
NAME	LOGAN, CRAIG	42 NAME	D
STREET ADDRESS	10010 WANDA DRIVE	43 STREET ADDRESS	POST OFFICE CABUYAO
CITY - ST - ZIP	PENASCOLA FL 32514	44 CITY - ST - ZIP	4025 LAGUNA, PHILIPPINES
TITLE	Vice President, U.S. Board (D)	51 TITLE	☐ Change ☒ Addition
NAME	THOMAS, Robert F.	52 NAME	D
STREET ADDRESS	3360 S.W. County Road 769	53 STREET ADDRESS	
CITY - ST - ZIP	ARCADIA, FL 33821	54 CITY - ST - ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

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 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:

Robert F. Thomas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 24, 1995

813-494-6477