## EXEMPT PROPERTYAPPLICATION O.C.G.A. 48-5-41

COUNTY	MAP & PARCEL #	DIGEST YEAR	
Efficience	G0130063		
TITLE HOLDER'S NAME			
Vinada	n Life Ministrie	s The	
NAME ON DIGEST	R RITE PETRISTIFE	3, +11	
THE OIL DIGEST			
PROPERTY ADDRESS			
121 6000	1 Place, Guyt	on GA	
121 6 0300	prace, Guyn	TELEPHONE NUMBER	
	3	TEELER HONE HOMBER	
DATE ACQUIRED	MARKET VALUE	OWNERSHIP (LEASED,	FEE SIMPLE etc)
3-15-2024	WARRET VALUE	OWNERSIII (EEASED,	ree shirt de, cic)
0 13 404/			
True of Duomontru	D D	-I D	
Type of Property:  ☐ Real	Property and/or   Person	al Property	
A. Mark (X) the appropriate desc	-		
of buildings =) If for	Personal Property please provid	e a detailed asset listing	& all
inventory			
Unimproved raw land	Recreation Facilities	Church administ	
Gov't owned buildings	Offices Masting halls	Perpetual care co	emetery offices
Non-profit public hospital Public library	Meeting halls Club house	Paved Equipment	
Public (owned) schools	Dormitories	Furniture & Fixt	ures
Private school – open to public	Classrooms	Inventory	ar ob
Housing owned by fraternity chapte	ers Parsonage (not rented)	V Others: (specify)	0
Non-profit home for aged	Church/Temple	Parking a	rea tor
Single family residence	Shrine	churck	
Concession stand	anlan) navinment		
Pollution control or energy saving (D.N.R. No. (include copy)			
Divine Ivo (mercue copy v	or continuation.)		
B. In the space next to the approp	oriate description of the use of the	e property for which the	exemption is
applied, indicate the proper perce	-		
Religious burial, 20% Religious v			orty. Em. 1070
reingrous during, 2070 reingrous	wording, 570 I arking, 6570 Onde	veroped rand.	
Undeveloped Land	Place	e of Religious Worship	
5 %Parking Lot	Place	e of Religious Burial	
Present/Future Building Site	Held	for Investment	
Gov't Owned	Othe	r (Specify)	
Agricultural			
Used for Recreation			
C. Mark (X) by one response to the	he right of each question below	N/A is for those	
questions that do not apply.)	ne right of each question below.	(14/L) 19 101 11108C	
questions that do not appry.)		,	YES NO N/A
1) Are any of the improvements	which have been designated in	Section A or D of	
1) Are any of the improvements	ted or leased for which income o		X

16) Is any part of the property being leased from the applicant? If yes, please explain.	YES	NO X	N/A
17) Is any incidental income received from non-rent use of the property? If so, please explain source and how the income is used.		X	
18) If services are rendered by the owner (hospital, charity, home for aged, etc) are these services available to the public without regard to the ability to pay by the person requesting services? If no, please explain circumstances.			X
19) Is there any reversionary benefit to anyone upon the sale of property or change in the use of property? If so, please specify whom.			
20) If you answered YES to question 7. Do you fall under 1. Public Charity 2. Private Foundation 3. Private Operating Foundation?			
21) If Non-Profit do you have a charter & bylaws? If yes, please provide them.		<u>X</u>	
22) List sources of funds received along with an approximate percentage breakdown for each source. (example: contributions 50%, federal assistance 25% public or patients 20%, dues or membership fees 5%) Please provide your Income Statement as well as a Cash Flow Statement			X
23) Explain briefly how these funds are used.			

a vacant lot, do any activities occur on of activities and how often.  Led for parking at a vicus or occasions occur.
contained herein to be true and correct
Nov. 13,2025 912-358-0725 (Telephone Number)