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

| COUNTY | MAP & PARCEL# | DIGEST YEAR |
|-------------------------------------------|--------------------------------------|-----------------------------------------------------|
| TITLE HOLDER'S NAME | 208-12 | 2024 |
| | inathan Slade | Speir |
| NAME ON DIGEST | | |
| Johna | Johan Slade Sp | Deik |
| PROPERTY ADDRESS 8142 H 1404 | I IN N | |
| | | TELEPHONE NUMBER |
| D. COVERDED | MARKET VALUE | 229-308-1179 OWNERSHIP (LEASED, FEE SIMPLE, etc) |
| DATE ACQUIRED 2025 | 289 960,00 | SWN |
| | | |
| Type of Property: ☐ Real | Property and/or 🎵 Person | al Property |
| A M 1 (37) do a companie de dese | | to the marcel of land; (The total number |
| | r Personal Property please provid | to the parcel of land: (The total number |
| inventory | reisonar i roperty pieuse provid | o a dotanica asset risting to an |
| Unimproved raw land | Recreation Facilities | Church administration buildings |
| Gov't owned buildings | Offices | Perpetual care cemetery offices |
| Non-profit public hospital Public library | Meeting halls Club house | Paved Equipment |
| Public (owned) schools | Dormitories | Furniture & Fixtures |
| Private school – open to public | Classrooms | Inventory |
| Housing owned by fraternity chapte | | Others: (specify) |
| Non-profit home for aged | Church/Temple | |
| Single family residence | Shrine | |
| Concession stand | | |
| D.N.R. No (include copy | (solar) equipment of certification.) | |
| D. In the succession of the | | |
| annlied indicate the manner manner | onate description of the use of the | e property for which the exemption is |
| Policiona huriol 200/ Policiona | intage which each description rep | presents to the total property. Ex. 10% |
| Religious burial, 20% Religious | worsnip, 5% Parking, 65% Unde | veloped land. |
| Undeveloped Land | 50% Place | e of Religious Worship |
| Parking Lot | Place | e of Religious Burial |
| Present/Future Building Site | | 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.) | - | |
| 1) A 6.4 | | |
| 1) Are any of the improvements | which have been designated in | Section A or B of |
| uns 10mm AT ANY TIME rent | ted or leased, for which income o | or fees received for — — — |

| | | YES | NO | N/A |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------|---------------|
| 2) | the use of any part of this property? (If yes, please identify and explain circumstances and terms on an attached sheet of paper) Is the property open to the general public?(ex: if church is it open to the general public) | | | |
| 3) | Is the use of the property restricted, limited, subject to approval or reserved for the use by any person(s), group(s), or organization?(ex: if a church, can the members use the property or is it restricted) | | | |
| 4) | Does any person, group, or organization have priority of use of property which is open to the general public? If yes, please identify. | | <u>X</u> | |
| 5) | Is the premises used for private, social, or fraternal meetings?(ex: it is rented out or used where the general public could not attend) | | | <u>X</u> |
| 6) | Are the property uses controlled by any individual or organization other than owner of record?(ex: if owned by private individual, and used for religious purposes, does a board control or the private individual) | | <u> </u> | |
| 7) | Is the property owner exempt from Federal/State income tax? If yes, fill in the IRC Section No (example Section 501 (c) (3)) | (<u>In</u> F | | |
| 8) | If the corporation entity holds IRC 501 (c) exemption, was it obtained prior to July 1, 1959? | | <u>x</u> | |
| 9) | Has the Federal or State Income tax exemption status ever been revoked or suspended? | | * | |
| 10 | Is the property owner a political subdivision or instrumentality of the county, state, or federal gov't? | | × | · |
| 11 | Is the property within the territorial limits of the political subdivision? | | $\overline{\chi}$ | |
| 12 | Is the property owned by private individuals? | * | | |
| 13 | Is the property owned by private organizations or clubs? | | × | |
| 14 | Is the property owner a non-profit corporation without stockholders? | | <u>X</u> | |
| 15) | Does the owner, any stockholder, or officer receive any income or profit for services rendered from the use of the property? If yes, please explain. | | <u>X</u> | |

| 6) Is any part of the property being leased from the applicant? If yes, please explain. | YES | NO X | N/A |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|--------------|
| 7) Is any incidental income received from non-rent use of the property? If so, please explain source and how the income is used. | | * | |
| (8) 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. | | <u> </u> | |
| 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. | | X | |
| 20) If you answered YES to question 7. Do you fall under 1. Public Charity 2. Private Foundation 3. Private Operating Foundation? | | | 丛 |
| 21) If Non-Profit do you have a charter & bylaws? If yes, please provide them. Tear email Areas | <u> </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 | | | × |
| 23) Explain briefly how these funds are used. | | | <u>\beta</u> |

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| 24) If the property or part of the property is a vac the premises? If so, please specify nature of ac | ant lot, do any activities occur on tivities and how often. |
|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| | |
| | |
| | |
| I hereby certify the information attached and conta | sined herein to be true and correct |
| to the best of my knewledge and belief. | anica herein to be true and correct |
| | |
| 1 my | 8-14-25 |
| Signature Social | 229-308-1179 |
| (Print Name) | (Telephone Number) |

EXEMPTION APPLICATION INSTRUCTIONS

ALL QUESTIONS ON THE APPLICATION MUST BE ANSWERED.

- Please only submit one application per parcel of real estate or account of personal property.
- Please describe only the property in which you are applying for, and not any other properties owned by the applicant.
- The fact that fees are received from the use of the property does not mean that the property is not exempt; but it is important that the applicant describe every charge in detail. Please state what expenses these fees/charges cover.
- If open to the general public, describe how often it is available to the public or which specific groups of people it is open for, or if service oriented, state the number of people available to apply for the services each year.
- Applicants applying for exempt status are typically organizations of some type, not private individuals. However, it is very important that all reasons are explained in detail in order to receive exempt status.
- Incidental Income is defined as income resulting from any use not directly related to the activities of the organization. Such as rental & lease fees for facilities.
- Exemption from state and federal income taxes does not automatically constitute exemption from ad valorem taxes & neither does non-profit status. Applicants must meet all Georgia Law requirements for Exempt status.

Control Number: 25153130

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF INCORPORATION

I, Brad Raffensperger, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Refresh Church Inc.
a Domestic Nonprofit Corporation

has been duly incorporated under the laws of the State of Georgia on 07/26/2025 by the filing of articles of incorporation in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 08/06/2025.



Brad Raffensperger Secretary of State

Brad Rafforgeger

ARTICLES OF INCORPORATION

Electronically Filed Secretary of State

Filing Date: 7/26/2025 1:53:57 PM

BUSINESS INFORMATION

CONTROL NUMBER

25153130

BUSINESS NAME

Refresh Church Inc.

BUSINESS TYPE

Domestic Nonprofit Corporation

EFFECTIVE DATE

07/26/2025

The corporation is organized pursuant to the Georgia Nonprofit Corporation Code.

PRINCIPAL OFFICE ADDRESS

ADDRESS

8142 GA Highway 17 N, Newington, GA, 30446, USA

REGISTERED AGENT

NAME

ADDRESS

COUNTY

Johnathan Speir

8142 GA Highway 17 N, Newington, GA, 30446, USA

Effingham

INCORPORATOR(S)

NAME

TITLE

ADDRESS

Johnathan Speir

INCORPORATOR

8142 GA Highway 17 N, Newington, GA, 30446, USA

MEMBER INFORMATION

The corporation will not have members.

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE

Johnathan Speir

AUTHORIZER TITLE

Incorporator