FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 732600

(2)

FILED Apr 07 1997 8:00am Secretary of State

| Corporation | | | | | |
|--|--|--|--|--|--|
| LOVE (| OF JESUS MINISTRIES, INC |))1 | | L FOLDER BEFOR AND AND ALANA CARA BOILL | ISIN BARU BARIK CIRNI SIBIN SARIN GARIK ALCI |
| | | | | | |
| Principal Place | e of Business | Mailing Address | | T TORING THE OUR THRICK STUDIES OF THE CONTROL OF T | EDIS DIRIT AIRST AFAIL PERFF DIATE SINGT TARE |
| 184 ESCON DID | 00 | 184 ESCON DIDO | | | |
| P.O. BOX 15121 | | P.O. BOX 151219 | 99345 1940 | | |
| ALTAMONTE SPRINGS FL 32715-8219 ALTAMONTE SPRINGS FL 32715 | | | 32/13-1218 | 3. Date Incorporated or Qualified 04/29/1975 | 3a. Date of Last Report 04/10/1996 |
| | | | | | 04/10/1996 |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | . (187 | 4. FEI Number 59-1619934 | Applied For |
| Suite, Apt | KiVgcwood AVE | 5 26 50, BO Suite, Apt. #, etc. | x 70 / | 00 10 10 00 7 | Not Applicable \$8.75 Additional |
| 22 | 910 | 27 | | 5. Certificate of Status Desired | Fee Required |
| City & State | | Gity & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 3 CAPE | CANAVERAL, FL | 28 AJE CANH | VERAL, PC | Trust Fund Contribution | Added to Fees |
| 3292 | Country | 20000 | Country 30 | 8. This corporation has liability for | |
| 4 2242 | 9. Name and Address of Curren | 129 30920 | 30 USA | Florida Statutes 10. Name and Address of New Re | Yes No |
| | 5. Hallio alla Addiesa di Califori | The state of the s | 81 Name | 70. 1101110 0110 11001000 01 11011 110 | Section View |
| LOWELL | E ULLY, JR. | | 99 Stront Add | dross (D.O. Bay Number is Not Assental | NA NA |
| 7520 RIDGEWOOD AVENUE | | | Sireet Aut | dress (P.O. Box Number is Not Acceptat | JIE) |
| # 910 | | | 83 | | |
| CAPE C | ANAVERAL FL 32920 | | 84 City | | B5 Zip Code |
| | | | | | IBS 2-10 COUR |
| | | | 7 7 | | |
| 11. Pursuant | to the provisions of Sections 617.050 | 2 and 617.1508, Florida Statu | 7 7 | rporation submits this statement for the patient's board of directors. I because | |
| 11. Pursuant office or ragent. La | to the provisions of Sections 617.050 egistered agent, or both, in the State mamiliar with, and accept the obliga | 2 and 617.1508, Florida Statu of Florida. Such change was atjons of Section 617.0503, F | 7 7 | rporation submits this statement for the pation's board of directors. I hereby acce | purpose of changing its registered of the appointment as registered |
| 11. Pursuant office or ragent. I a | | | ites the above-named core sulfighted by the corpora ideals Statues. | rporation submits this statement for the pation's board of directors. I hereby accept | purpose of changing its registered of the appointment as registered |
| SIGNATURE | Signature, typed originated name of the gistered age | ultand title if applicable. | ites the ebove-named cor authorized by the corpora local Statues | ured when reinstating) | purpose of changing its registered of the appointment as registered |
| SIGNATURE _ | | ultand title if applicable. | ites the above-named core sulfighted by the corpora ideals Statues. | 1 4 | purpose of changing its registered of the appointment as registered |
| SIGNATURE | Signature, typed orkey rechanged legistered ago OFFICERS ANI | in and title if applicable. | ites the ebove-named cor authorized by the corpora idead. Statues of Buttered Agentsignature req 13. | ured when reinstating) | purpose of changing its registered of the appointment as registere |
| SIGNATURE _ 12. TITLE NAME | Signature, typed orkenned name of lagistered age OFFICERS AN | in and title if applicable. | ites the above-named con authorized by the corpora- identa Statutes The transfer of the corporative records 13. 1.1 TITLE | ured when reinstating) | purpose of changing its registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS | Signature, typed ortented name of the fistered age OFFICERS AN PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL | in and title if applicable. | teen the above-named cor authorized by the corpora- ideals Statutes Before Agent Egnature red 13. 1.1 TITLE 1.2 NAME | ured when reinstating) | purpose of changing its registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP | Signature, typed ortented name of the fistered age OFFICERS AN PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE | in and title if applicable. | teen the above-named congular face by the corporation of Statures. The fundamental face of the corporation | ured when reinstating) | purpose of changing its registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. | or and title if applicable. D DIRECTORS DELETE | tes the above-named cor authorized by the corpora- ideals Statures The function of the corpora- tion of the corpora- tion of the corporation of the 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-ST-ZIP | ured when reinstating) | purpose of changing its registered of the appointment as registered |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE | or and title if applicable. D DIRECTORS DELETE | teen the above-named congular faced by the corporation of the corporat | ured when reinstating) | purpose of changing its registered of the appointment as registered |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP HAME STREET ADDRESS CHY-ST-ZIP | Signature, typed originated name of the platened age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL | in and title if applicable. D DIRECTORS DELETE DELETE | Ites the above-named con a full of ized by the corporation of the corp | ured when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered por the appointment as registered of the appointment as register |
| SIGNATURE 12. TIPLE NAME STREET ADDRESS CHY-SI-ZIP THE NAME STREET ADDRESS CHY-SI-ZIP THE | Signature, typed originated name of the platened age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD | or and title if applicable. D DIRECTORS DELETE | Ites the above-named cor all prized by the corpora incides Statures. 13. 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 | ured when reinstating) ADDITIONS/CHANGES TO OFFICE | purpose of changing its registered of the appointment as registered |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY: ST-ZIP TITLE NAME STREET ADDRESS CHY: ST-ZIP TITLE NAME | Signature, typed originated name of the platened age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. | in and title if applicable. D DIRECTORS DELETE DELETE | Ites the above-named cor all prized by the corporation of the corporat | ured when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered por the appointment as registered of the appointment as register |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET | in and title if applicable. D DIRECTORS DELETE DELETE | Ites the above-named cor all prized by the corporation of the corporat | ured when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered por the appointment as registered of the appointment as register |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP | Signature, typed ortented name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL | D DIRECTORS DELETE DELETE | Ites the above-named coraling fized by the corporation of the corporat | ured when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE | Signature, typed ortented name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D | in and title if applicable. D DIRECTORS DELETE DELETE | Ites the above-named cor autility fixed by the corporation of the corp | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed originated name of the fastered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA | D DIRECTORS DELETE DELETE | Ites the above-named cor autility fixed by the corporation of the corp | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed ortented name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D | D DIRECTORS DELETE DELETE | Ites the above-named cor autility fixed by the corporation of the corp | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE | Ites the above-named cor autility fixed by the corporation of the corp | ured when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered of the appointment as registere |
| SIGNATURE 12. IITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE DELETE | Ites the above-named cor autility fixed by the corporation of the corp | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE DELETE | Ites the above-named cor all prized by the corporation of the corporat | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registered of the appointment as registere |
| SIGNATURE 12. IITLE NAME STREET ADDRESS CUY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE DELETE DELETE | Ites the above-named cor ally present a by the corporation of the corp | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registered of the appointment as registere |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE DELETE | Ites the above-named cor and present a bove-named corporation and present a bove-named corporation and a bove-named corporation and a bove-named corporation and a bove-named corporation and a bove-named and a street address and a city-st-zip and title a same and a street address and a city-st-zip and title a same and a street address a city-st-zip and a street address a stre | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registered of the appointment as registere |
| SIGNATURE 12. IIITLE NAME STREET ADDRESS CITY-ST-ZIP IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE DELETE DELETE | Ites the above-named cor and red to be a corporated by the corporation of the corporation of the corporate o | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registered of the appointment as registere |
| SIGNATURE 12. 11/1E NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed originated name of the fistered age OFFICERS ANI PD LILLY, LOWELL E, JR 7520 RIDGEWOOD AVE CAPE CANAVERAL FL STD LILLY, PHYLLIS A. 7520 RIDGEWOOD AVENUE CAPE CANAVERAL FL VD DODSON, EDITH J. 100 W. 30TH STREET SANFORD FL D JOHNSON, GINA 4218 OAKRIDGE RD | D DIRECTORS DELETE DELETE DELETE DELETE | Ites the above-named cor and present a bove-named corporation and present a bove-named corporation and a bove-named corporation and a bove-named corporation and a bove-named corporation and a bove-named and a street address and a city-st-zip and title a same and a street address and a city-st-zip and title a same and a street address a city-st-zip and a street address a stre | Jired when reinstating) ADDITIONS/CHANGES TO OFFICE | Durpose of changing its registered by the appointment as registered of the appointment as registere |

4. 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: CONCIL EXCISE INTERIOR OF PRINTED NAME OF SIGNAF OFFICER OF DIRECTOR OF DIRECTOR DATE OF DATE OF DIRECTOR OF DIRECT