## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 18 1997 8:00am

Secretary of State

561-793-4167

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 75

 I do hereby certify that the information information indicated on this annual re

SIGNATURE:

757181

(3)

## PROMISE HOUSE MINISTRIES, INC.

Principal Place of Business					Mailing Address				<del></del>	- ! !	404 <del>4</del> 101441	811 81911 81914 B	
% JAMES A OSTENDARP 12750 ORANGE GROVE BLVD ROYAL PALM BCH FL 33411				12	% James a Ostendarp 12750 Orange Grove Blvd Royal Palm BCH Fl 33411-8911								
										3. Date Incorporated or Qualified 05/06/1981	3a. D	ate of Last R 03/21/19	eport <b>96</b>
2. Principal Place of Business					2a. Mailing Address					4. FEI Number		Ap	plied For
21				26	<u> </u>					59-2470416		No	t Applicable
22	· · · · · · · · · · · · · · · · · · ·			27						5. Certificate of Status Desired		\$8.75 / Fee Re	
	City & State			-	City & State					6. Election Campaign Financing	r <del>ia</del>	\$5.00	
23	Zip	Country			Zip Country				Trust Fund Contribution		Added t		
24		25			29 30			,		This corporation has liability for i     Florida Statutes		tax under s. No	199.032,
		9. Name	and Address of Current		tered Agent		1			10. Name and Address of New Re	· · · · · · · · · · · · · · · · · · ·		
							B1	T	Name			*	
OSTENDARP, JAMES A 12750 ORANGE GROVE BLVD								1	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
			CH FL 33411		4		83	T				······	
							84	1-7	City			85 Zip (	Code
			· · · · · · · · · · · · · · · · · · ·					`	1		_FL	. 1	
11	<ul> <li>Pursuant office or r</li> </ul>	to the provis registered ag	ions of Sections 617,0502 ent, or both, in the State (	? and 6 of Flori	17.1508, Florida da. Such chang	a Statutes, e was auth	the above orized by	e-n y th	named corporation	oration submits this statement for the pon's board of directors. I hereby acceptions	urpose o	f changing it ointment as	s registered registered
		ım familiar wi	th, and accept the obliga	tions o	f, Section 617.0	503, Florid	a Statute	8.					
SI	GNATURE .	Signature, typed	or printed name of registered agen	t and title	if applicable.	(NOTE: Re	pistered Ape	ent e	signature required	of when reinstating)	DATE		** * * * * * * * * * * * * * * * * * * *
12	2.		OFFICERS AND	DIREC	CTORS		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
111	LE	PTD	1		☐ DEL	ETÉ	1.1 TITLE					Change	Addition
	ME		DARP, JAMES A				1.2 NAME						
	REET ADDRESS	l .	DRANGE GROVE BLVD	)			1.3 STREET						
CIT	Y-ST-ZIP	VD VD	PALM BCH FL		☐ DEL	CTC	1.4 CITY - S	ST - 2	np			T   66	e de la companio
			INETTE M			C1C	2.1 TITLE 2.2 NAME					L Change	Addition
	AME HAYDU, JOETTE M  REET ADDRESS 9240 SW 51 PLACE							7 4 D	obece				
	Y-ST-ZIP		R CITY FL				2.3 STREET 2.4 CITY-1			. •			
TIT		VSD			☐ DELI	ETE	3.1 TITLE	J-( *)			<del></del>	Change	☐ Addition
NA	ME		OARP, JOYCE M				3.2 NAME					-	277.7
ST	REET ADDRESS		PRANGE GROVE BLVD	}			3.3 STREET	I AD	ORESS				•
_	Y-ST-ZIP	ROYAL	PALM BCH FL		·		3.4. CITY - 5	ST-	ZIP				
TIT					☐ DELI	ETË	4.1 TITLE					Change	☐ Addition
NA.							4.2 NAME						
	REET ADDRESS						4.3 STREET		1				
TIT	Y+ST-ZIP LE				☐ DËLI	ETE	4.4 CITY - S 5.1 TITLE	51- <b>Z</b>	IIP		•	Change	Addition
NAI						-:- <del>-</del>	5.2 NAME					CHOUNT	had realition
	REET ADDRESS						5.3 STREET	[ ADI	DRESS				
	Y-ST-ZIP						5.4 CITY-S						
<b>T</b> IT	LE				☐ DELE	ETE	6.1 TITLE	<del></del>				Change	Addition
NAI	ME						6.2 NAME						
STF	REET ADDRESS						6.3 STREET	r adi	DAESS				
OI7	U 67 710	!							[				

supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the port or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that tration or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name