FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT #

(7)

	FILEL)
Apr 03	1998	8:00am
Secre	etary o	f State

WORLD	OUTREACH CHURCH, INC).			## ###################################		
Principal Plac	e of Business	Mailing Address			if 19014 90101 ilgəl (1001 419) 818)	d 01011 01614 01011 31011 01911 1001	
C/O GENE POLINO 7601 FOREST CITY ROAD			09/06/				
			4. FEI Number 59-245		Applied For Not Applicable		
2. Principal P	lace of Business	24. Mailing Address		5. Certificate of		\$8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. Election Can	mpaign Financing	\$5.00 May Be		
27			Trust Fund C	·	Added to Fees		
23 City & State	City & State City & State			7. Is this nonpro	7. Is this nonprofit corporation a homeowners association?		
Ζ ί ρ	Country	Zip	Country	8. This corpora	tion owes or has paid the	current year Intangible	
24	25	29 3	0		perty Tax due June 30.	Yes K No	
	8. Name and Address of Curren	t Registered Agent	24		Address of New Register	ed Agent	
			81 Nam	HARON G. PETERS	SON _		
POLINO,	GENE REST CITY ROAD		82 Stre	et Address (P.O. Box Numb 601 FOREST CITS	ber is Not Acceptable)		
	O FL 32810		83	OI FURBUL VIII	I KUAD		
			84 City	LANDO		EL 85 Zip Code 32810	
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	, the above-nam	ed corporation submits this			
office or re	to the provisions of Sections 617,050, egistered agent, or both, in the State manufamiliar with, and accept the oblige	of Florida, Such change was aut	horized by the c	orporation's board of direct	tors. I hereby accept the	appointment as registered	
SIGNATURE	ARALA \ /G/ / ///~~	Sharon	i G. Petei	rson		ebruary 25, 199	
	Signature, typed or printed name of registered age	int and title if applicable. (NOTE: R	Registered Agent signa	ture required when reinstating)	DAT	TE .	
12.	OFFICERS AND		13.	ADDITIONS/C	HANGES TO OFFICERS		
TITLE	PD	☐ DELETE	1.1 TITLE			Change Addition	
NAME OTDCET ADDDECO	HINN, BENEDICTUS		1.2 NAME				
STREET ADDRESS	%7601 FOREST CITY ROAD ORLANDO FL		1.3 STREET ADDRES	5 }			
CITY-ST-ZIP TITLE	VD VD	X DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Director		X Change Addition	
NAME	WELKER, ROBERT		2.1 NILC 2.2 NAME	DAN BETZER	•	ten Austrilla	
STREET ADDRESS	721 KEENE RD.		2.3 STREET ADDRES		AT. DRTVR		
CITY+ST-ZIP	APOPKA FL		2.4 CITY - ST - ZIP	FT. MYERS, F			
TITLE	\$D	DELETE	3.1 TITLE	Secretary	п эээүг	X Change Addition	
NAME	B EIK, STEPHEN	•	3.2 NAME	J. DON GEORG	SE .	-	
STREET ADDRESS	4101 LAKE DESTINY DR., #13	ស	3.3 STREET ADDRES	s 3000 W. AIRP	ORT FREEWAY		
CITY-ST-ZIP	MAITLAND FL		3.4. CITY - ST - ZIP		75062		
TITLE	AST	X DELETE	4.1 TITLE	Director		Change Addition	
NAME	WOLFE, DICK	1	4.2 NAME	FRED ROBERTS	.		
STREET ADDRESS	3005 ALAMO DRIVE		4.3 STREET ADDRES		D, APT. #104		
CITY-ST-ZIP	ORLANDO FL		4.4 CITY - ST - ZIP		TH AFRICA 400		
TITLE	TD	A DELETE	5.1 TITLE	Treasurer		Change Addition	
NAME	POLINO, GENE		5.2 NAME	BENEDICTUS H	IINN		
STREET ADDRESS	7601 FOREST CITY RD.		5.3 STREET ADDRES	LANT LATERAL	CITY ROAD		
CITY-ST-ZIP	ORLANDO FL	- Di po esc	5.4 CITY - ST - ZIP	ORLANDO, FL	32810		
TITLE	D	A DELETE	6.1 TITLE			Change Addition	
NAME	HAUS, RONALD	j	6.2 NAME				
STREET ADDRESS	5101 PT CHICAGO HWY		6.3 STREET ADDRES	s			
CITY-ST-ZIP	CONCORD CA		6.4 CITY - ST - ZIP	1100 11			

I 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 Bfock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

(407)
Benedictus Hinn March 23, 1998 293-7449