

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **841671** (1)
1. Corporation Name
WORLD EVANGELISM OF THE STATE OF CALIFORNIA, INC.



Principal Place of Business	Mailing Address
INTERNATIONAL HEADQUARTERS P O BOX 85277 SAN DIEGO CA 92186	INTERNATIONAL HEADQUARTERS P O BOX 85277 SAN DIEGO CA 92186

3. Date Incorporated or Qualified 10/25/1978	3a. Date of Last Report 05/01/1995
4. FEI Number 95-2372233	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent

**WINTER, EDWARD J.
19 W. FLAGLER ST.
SUITE 1101 BISCAYNE BLDG.
MIAMI, FL H 33130**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	S <input type="checkbox"/> DELETE
NAME	CERULLO, THERESA
STREET ADDRESS	3545 AERO COURT
CITY-ST-ZIP	SAN DIEGO, CA 00000
TITLE	P <input type="checkbox"/> DELETE
NAME	CERULLO, MORRIS
STREET ADDRESS	3545 AERO COURT
CITY-ST-ZIP	SAN DIEGO, CA 00000
TITLE	D <input type="checkbox"/> DELETE
NAME	TRULIN, PAUL
STREET ADDRESS	5710 AUBURN BLVD 24
CITY-ST-ZIP	SACRAMENTO CA
TITLE	D <input type="checkbox"/> DELETE
NAME	BLAIR, CHARLES
STREET ADDRESS	200 S UNIVERSITY BLVD
CITY-ST-ZIP	DENVER CO
TITLE	D <input type="checkbox"/> DELETE
NAME	GROENKE, JOHN
STREET ADDRESS	3216 TANGLEWOOD DR
CITY-ST-ZIP	ROCK HILL SC
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **04/25/96** (619) 277-2200
Date Daytime Phone #

CP2E037 (12/95)