


FILE NOW: FILING FEE IS \$61.25

FILED

Jul 21 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N07534**  
1. Corporation Name **The Missionary Directional Mission Church of God Inc.**

Principal Place of Business **Ft. Myers Fla. 2929 Winkler Ave 33916**

3. Date Incorporated or Qualified **CSAN. 24, 1985**  
4. FEI Number **59-2490339**  
Applied For ☐ Not Applicable ☒

2. Principal Place of Business	2a. Mailing Address
21 <b>Ft Myers Fla</b>	26 <b>2929 Winkler Ave #1007</b>
22 <b>1007</b>	27 <b>1007</b>
23 <b>Ft Myers Fla</b>	28 <b>Ft. Myers FLA.</b>
24 <b>33916</b>	29 <b>33916</b>
25 <b>Lee</b>	30 <b>Lee</b>

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**  
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent  
**Cornell Cunningham**  
**2929 Winkler Ave**  
**Ft. Myers Fla 33916**

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: **Bishop: Cornell Cunningham**

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	<b>Bishop</b>
STREET ADDRESS	<b>Cornell Cunningham</b>
CITY-ST-ZIP	<b>2929 Winkler Ave</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>V/D Elizabeth Cunningham</b>
STREET ADDRESS	<b>2929 Winkler Ave</b>
CITY-ST-ZIP	<b>Ft. Myers Fla 33916</b>
TITLE	<input type="checkbox"/> DELETE
NAME	<b>S/D Viola Battle</b>
STREET ADDRESS	<b>2424 South St</b>
CITY-ST-ZIP	<b>Ft. Myers Fla</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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: **Bishop: Cornell Cunningham** **Cornell Cunningham** **6/25/98 (941)274 0562**

CR2E037 (10/97)