FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 N19086 DOCUMENT # 1. Corporation Name

(0)

LAUNCH OUT MINISTRIES, INC.											
Principal Place of Business Mailing Address							- I 19061101 030 41016 10111 00180 1010 01	IA BUNUU BUNU	Stati Biet	1 MINIT ASNIT INDE	
BOX 3943 BOX 3943 TEQUESTA FL 33469 TEQUESTA FL 33469											
							3. Date incorporated or Qualified 02/05/1987	3a. Dat	e of Last 5/01/1	t Report 995	
2. Principal P	lace of Business	2a. Mailing Address 26					4. FEI Number 59-2834836	L	<u> </u>	Applied For Not Applicable	
Suite, Apt. 22	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & Stat	е	City & State				Election Campaign Financing Trust Fund Contribution		\$5.0	00 May Be		
Zip 24	Country 25	Z 29	iρ	Coul	ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes \[\begin{align*} \text{ Yes } \begin{align*} \text{ No } \end{align*}				
	9. Name and Address of Curre	nt Register	ed Agent	1			10. Name and Address of New Reg				
					81	Name			<u></u>		
	RANCES			}	82	Stroot Address	s (P.O. Box Number is Not Acceptable)				
17187 WILDWOOD ROAD					62	Street Addres	s (F.O. BOX NUMBER IS NOT Acceptable)				
JUPITER FL 33478				[83						
				<u> </u>	84	City		 .	85 Zı	p Code	
11 Directions	40 the		540 5 11 0			•		FL		•	
Or registe	ieu ageil, or dolli, al life olale di fidri	ve-na orpo	amed corporat eration's board	on submits this statement for the purpo of directors. I hereby accept the appoint	se of char	ging its r	registered office				
ion i inici i i i	ith, and accept the obligations of, Sect	tion 617.050	03, Florida Statutes.	ŕ	•		are a control of the depoint	mont do n	gotoroo	ragent. Fam	
SIGNATURE	Signature, typed or printed name of registered agent	t and title if sort	calls (NOT)	- Florest and		signature required w					
12.	OFFICERS AN			13.	-gen	signature required w	ADDITIONS/CHANGES TO OFFICE	DATE ES AND I	NOCCIC	NDC IN 12	
TITLE	PD		DELETE	1111	LE		A CALL TO CALL OF THE CALL OF		Change	Addition	
NAME	HALL, FRANCES		12 NA		ME			_	, 		
STREET ADDRESS			135		13 STREET ADDRESS						
CITY - ST - ZIP	JUPITER FL				1.4 CiTY-ST-ZiP						
TITLE	VD			21 TITLE					Change	Addition	
NAME	INGMAN, MICKEY			2 2 NAME							
STREET ADDRESS	1030 SW COLEMAN DR			2 3 STREE		DORESS					
CITY-ST-2IP	PT ST LUCIE FL			2 4 CIT	Y-ST	- ZIP					
TITLE	STD INCMAN LAUDA		DELETE	3 1 111	LE				Change	Addition	
NAME	INGMAN, LAURA 1030 SW COLEMAN DR			3.2 NA	ME					ļ	
STREET ADDRESS	PT ST LUCIE FL			3 3 STR	REET A	ODRESS					
CITY-ST-ZIP TITLE	D		DELETE	3.4 CIT		· ZIP					
NAME	UNDERWOOD, JIM		Dottele	4.1 TiTL				L	l Change	Addition	
STREET ADDRESS	1038 CHURCH HILL CIR S			4. 2 NA							
CITY-ST-ZIP	WEST PALM BCH FL					DORESS					
TITLE	D		DELETE	4.4 CIT		- 211			Change	Addition	
NAME	UNDERWOOD, JOANN			5 2 NAM					CHAINE	☐ Addition	
STREET ADORESS	4000 OLB BOOLL CHILL OID O			53 STREET A		DDRESS					
CITY-ST-ZIP	WEST PALM BCH FL			5 4 CITY						1	
TITLE			DELETE	61 TiTL					Change	Addition	
NAME				6 2 NAN					- 3"		
STREET ADDRESS				6.3 STR		DORESS					
CITY - ST - ZIP				6.4 CITY	(-SI-	21P				!	
14. I do hereb	y certify that the information supplied v	with this filin	g is voluntarily furnish	ned and d	oes	not qualify for t	he exemption stated in Section 119.07(3Vk) Floric	a Statuti	es 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. I further 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; I further 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. I further 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. I further 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. I further 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.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 407-340-0759
Dating Proces
Secretary/Trees.