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NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

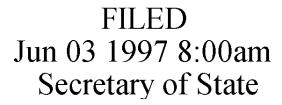
1997 DOCUMENT #

(0)

JEFFERSON COUNTY MINISTERS CONFERENCE CORPORATIO

Principal Place of Business

Mailing Address





2. Principal Place of Business 2a. Mailing Address 2b. Mailing	ROUTE 2. BOX 27-AA MONTICELLO FL 32344		ROUTE 2. BOX 27-AA MONTICELLO FL 32344-950	ROUTE 2. BOX 27-AA MONTICELLO FL 32344-9503					
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BROOKINS, JIMMY ROUTE 2, BOX 27-AA MONTICELLO FL 32344 11. Pyrauent to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the advanced by the corporation submits this statement for the purpose of changing is 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 office or registered agent, and the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment as registered of the composition's board of directors. I hereby accept the appointment ac	9. Name and Address of Current Registered Agent								
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ROUTE 2, BOX 27-AA MONTICELLO FL 32344 83 City FL 85 C	BROOKIN	NS. AIMMY							
MONTICELLO FL 32344 83				82 St	reet Address	(P.O. Box Number is Not Acceptab	le)		
### City ### B\$ Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-hamed 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, and accept the obligations of, Section 617.0502, Florida Statutes. ### SIZIP Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes. ### SIZIP Code 11. Interminist with, and accept the obligations of, Section 617.0502, Florida Statutes. ### SIZIP Code 11. Interminist with a deep interminist a septiment as registered agent and size a septiment as registered agent. ### SIZIP Code 11. Interminist with a septiment and registered agent and size a septiment as registered agent. ### SIZIP Code 12. Interminist with a septiment as registered agent. ### ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 ### SIZIP Code 12. Interminist with a septiment as registered agent and size a septiment as registered agent. ### ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 ### SIZIP Code 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 ### SIZIP CODE ### ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12 ### SIZIP 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 approximent as registered organ. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature Symbol or printed name of impatered agent and the 4 approximate in the purpose of changing its registered of directors. I hereby accept the approximent as registered of the purpose of changing its registered of directors. I hereby accept the approximent as registered organized when religiously accept the approximent as registered of directors. I hereby accept the approximent as registered organized when religiously accept the approximent as registered of directors. I hereby accept the approximent as registered of directors. I hereby accept the approximent as registered organized when religiously accept the approximent as registered of directors. I hereby accept the approximent as registered of directors. I hereby accept the approximent as registered organized when religiously accept the purpoximent as registered organized. 13.	MONTIOCOLO PL 02044			**					
11. Presuent 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of impassed agent and title 4 applicable. NOTE: Registered Agent signature required when relimitance) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILL PD OKINS, JIMMY 12. NAME BROOKINS, JIMMY 12. NAME PROUTE 2, BOX 27-AA 13. STREET ADDRESS CITY-ST-ZP TILL VO Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. CHANGE 12. TITLE VO Change Addition Addition NAME RANSOM, BEN STREET ADDRESS CITY-ST-ZP TILL SO MONTICELLO FL 12. TITLE SO MONTICELLO FL 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. CHITY-ST-ZP TITLE VO Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. TITLE VO Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. TITLE VO Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ST-ZP TITLE SO MONTICELLO FL 18. TITLE SO MONTICELLO FL 19. DELETE 19. DELETE 19. DELETE 19. DELETE 19. DELETE 19. TITLE Change Addition ADDITIONS/CHANGES CHANGES ADDITIONS/CHANGES CHANGES ADDITIONS/CHANGES CHANGES ADDITIONS/CHANGES CHANGES CITY-ST-ZP TITLE DELETE 19. D				84 Ci	ly		85 Zip	Code	
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I do thereby 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.