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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N24868** **(4)**

1. Corporation Name

LORD GOD ALMIGHTY IN JESUS CHRIST MINISTRY CORP.

Principal Place of Business	Mailing Address
C/O JACOB JOHN KEYE 2244 COURTNEY DR JACKSONVILLE FL 32208 US	C/O JACOB JOHN KEYE 2244 COURTNEY DR JACKSONVILLE FL 32208-3019 US

3. Date Incorporated or Qualified: 02/17/1988
3a. Date of Last Report: 05/01/1996

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

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KEYE, JACOB JOHN
2244 COURNTEY DR
JACKSONVILLE FL 32208

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 Jacob John Keye — Jacob John Keye (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) — 4-26-97 DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KEYE, JACOB JOHN 2244 COURTNEY DR JACKSONVILLE FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VD Pressley, Donald 1260 Lorento Street Jacksonville, FL 32211	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEYE, ALAND S. 3398 NW 212TH STREET CAROL CITY FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RODMAN, SHARON D. 3650 RING LANE APT. 207 JACKSONVILLE FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MILLER, ALLEN D 7086 WELLAND RD JACKSONVILLE FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST KEYE, JOSIE E. 2244 COURTNEY DR JACKSONVILLE FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	900002186029 -05/21/97--01008--002 ***11.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	700002186027 -05/21/97--01008--001 ***50.25 CS 5/9/97	☐ Change ☐ Addition

CR2E037 (9/96)

14. I do 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: Jacob John Keye — Jacob John Keye — 4-26-97 — (904) 768-2543
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number