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Mar 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N35848** **(3)**

1. Corporation Name

PUTNAM RADIO MINISTRIES, INC.

Principal Place of Business	Mailing Address
C/O SELLERS, JEFFERY S 3111 ST. JOHNS AVE. PALATKA FL 32177 US	% JERRERY S. SELLERS 3111 ST. JOHNS AVE. PALATKA FL 32177-4131

3. Date Incorporated or Qualified: **12/28/1989**
3a. Date of Last Report: **06/14/1996**

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: **59-3009352** ☐ 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

SELLERS, JEFFERY S.
3111 ST. JOHNS AVE
PALATKA FL 32177

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: Jeffery D. Sellers — 3-12-97
Signature of new registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SELLERS, JEFF		1.2 NAME		
STREET ADDRESS	3111 ST. JOHNS AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALATKA FL		1.4 CITY-ST-ZIP		
TITLE	DST	☒ DELETE	2.1 TITLE	D	☐ Change ☒ Addition
NAME	HEILMAN, PHILIP A.		2.2 NAME	MARTY FAW	
STREET ADDRESS	RT 6 BOX 1166		2.3 STREET ADDRESS	126 ST JOHNS TERR W	
CITY-ST-ZIP	PALATKA FL		2.4 CITY-ST-ZIP	EAST PALATKA FL 32131	
TITLE	D	☐ DELETE	3.1 TITLE	DST	☒ Change ☐ Addition
NAME	HALL, SONNY		3.2 NAME	SONNY HALL	
STREET ADDRESS	RR 5 BOX 6313		3.3 STREET ADDRESS	RR 5 BOX 6313	
CITY-ST-ZIP	PALATKA FL		3.4 CITY-ST-ZIP	PALATKA FL 32177	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	GABORIAU, ANDRE		4.2 NAME		
STREET ADDRESS	PO BOX 2441		4.3 STREET ADDRESS		
CITY-ST-ZIP	PALATKA FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	RAGANS, GERALD		5.2 NAME		
STREET ADDRESS	3502 KENNEDY STREET		5.3 STREET ADDRESS		
CITY-ST-ZIP	PALATKA FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HART, THAD		6.2 NAME		
STREET ADDRESS	RT 2 BOX 152-A		6.3 STREET ADDRESS		
CITY-ST-ZIP	EAST PALATKA FL		6.4 CITY-ST-ZIP		

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: Jeffery D. Sellers — 3-12-97 — (904) 325-9927
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0003610