


FILE NOW: FILING FEE IS \$61.25

FILED
Jan 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000000622 (0)
 1. Corporation Name
DAYSTAR HOPE CENTER OF PASCO COUNTY, INC.



Principal Place of Business 15512 HWY 301 DADE CITY FL 33523 US	Mailing Address 15512 HWY 301 DADE CITY FL 33523 US
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3. Date Incorporated or Qualified
02/21/1994

4. FEI Number 59-3223358	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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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

WILXMAN, SISTER HELEN
15512 HWY 301
DADE CITY FL 33523

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	WILXMAN, SISTER HELEN
STREET ADDRESS	37527 ORANGE VALLEY LN
CITY-ST-ZIP	DADE CITY FL 33525
TITLE	V <input type="checkbox"/> DELETE
NAME	ADORNETTO, JOHN
STREET ADDRESS	11205 REDBIRD DR.
CITY-ST-ZIP	DADE CITY FL 33525
TITLE	TR <input type="checkbox"/> DELETE
NAME	HULL, DONNA
STREET ADDRESS	39301 WILDS RD
CITY-ST-ZIP	DADE CITY FL 33525
TITLE	ST <input type="checkbox"/> DELETE
NAME	MANSFIELD, CARMALITA
STREET ADDRESS	13728 3RD ST
CITY-ST-ZIP	DADE CITY FL 33525
TITLE	T <input type="checkbox"/> DELETE
NAME	MICHAUD, JOHN
STREET ADDRESS	11224 REDBIRD ST
CITY-ST-ZIP	DADE CITY FL 33525
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	Tr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	13728 2nd St
4.4 CITY-ST-ZIP	
5.1 TITLE	Tr <input checked="" 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: *Sister Helen Wilxman* **Jan. 13, '98 523-0844**

CR2E037 (10/97)