	, FILE NOV	V: FILING FE	E IS \$61.25	•									
COI	NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT Katherine Har- Secretary of Sta DIVISION OF CORPOR		rris ste			CONTRACTOR OF SERVICES					
DOCUMENT # N9600000751 1. Corporation Name THE POTTER HOUSE MINISTRY, INC.							2	1000 • 2		(1) J. (1)	\		
Principal Plac 913 MALLOY PERRY FL 323		913 M	Mailing Address 913 MALLOY STREET PERRY FL 32347										
Sulte, Apt.		26 Su 27	Suite, Apt. #, etc.			3. Date Incorporated 02/13/1996 4. FEI Number 59-3358777			ualifed	Applied For Not Applicable			plicable
City & Stal	Country 25	28	Zip Cour				6. Elect	ifcate of Status Des tion Cempaign Fina t Fund Contribution	incing			Require D May	ed / Be
SLADE, A	9. Name and Address LZO LOW STREET SSEE FL 32304	of Current Registere	d Agent		81 82 83	Name Street Add		e and Address of				Code	
11. Pursuant office or ragent. I a	to the provisions of Section egistered agent, or both, in m familiar with, and accept	the obligations of, Sec	tion 617.0503, Flori	s, the ab ithorized ida Statu	ove- by thes.	named cor he corporal			for the p				
12.	Signature, typed or printed name of re	CERS AND DIRECTO		13.	sgent :	algnature requi	red when reinstatin	ରା TIONS/CHANGES	TO OF	CERCANI	DIDECT	Ope	IAL 40
	TP OF FI	CERS AND DIRECTO	DELETE	———		$ \tau$	ADDII	HONS/CHANGES	TO OFF	CERS AN	Change		Addition
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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, with all other like empowered.

SIGNATURE: