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NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N96000004823 (8)

JOYOUS CHURCH FELLOWSHIP, INC.

FILED
Feb 02 1998 8:00am
Secretary of State

301003 CHONON FELLOWARIF, INC.								
Principal Place of Business Mailing Address					-	<u> </u>		
711 & 713 US #1 P.O. BOX 12462 FT PIERCE FL 34950 FT PIERCE FL 349					3. Date Incorporated 09/16/1996			
US					4. FEI Number			oplied For
2. Principal Place of Business 2a. Mailing Address					65-049757	<u> </u>		ot Applicable
21 26					5. Certificate of Status	s Desired 🔲		Additional equired
Suite, Apt. #, etc. Suite, Apt. #, etc.					6. Election Campaign	Financing	\$5.00	
22 27					Trust Fund Contrib		Added to	
City & State City & State				7. Is this nonprofit corporation a homeowners association?			n?	
Zip	Country	Zip	Country	,	8. This corporation owes or has paid the current year Intangible			
24	25		30		Personal Property Tax due June 30. Yes X No			
	9. Name and Address of Curr	rent Registered Agent	81		10. Name and Addres	s of New Registered	Agent	
DDEM	IOLINI D		81	Name	i			
DREW, JOHN D 711 & 713 US #1			82	Street Addr	ess (P.O. Box Number is	Not Acceptable)		, , , , , , , , , , , , , , , , , , , ,
FT PIERCE FL 34950			83					
	02 / 2 0 1000		84	City	· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
				,		FL	. `	
11. Pursuant office or r	to the provisions of Sections 617.0 egistered agent, or both, in the Sta m familiar with, and accept the ob	1502 and 617.1508, Florida Statute ate of Florida. Such change was a	es, the above authorized by	e-named corp the corporat	oration submits this stater ion's board of directors. I	ment for the purpose o hereby accept the app	f changing it ointment as	s registered registered
agent. I a	_		rida Statutes	s.				
SIGNATURE John D. Drew Signature, hyped or printed name of registered agent and title if applicable. (NOTE, Registered Agent				ent signature requir	ed when reinstating)	DATE	1/16/	98
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANG	ES TO OFFICERS AND		
TITLE	D	DELETE	1.1 TITLE				Change	Addition
NAME	DREW, JOHN D		1,2 NAME		; }			
STREET ADDRESS	OTHER FLAGOR			ADDRESS		• •		
CITY-ST-ZIP TITLE			1.4 CITY - S 2.1 TITLE	51 - ZIP			Change	Addition
NAME			2.2 NAME		1			
STREET ADDRESS			2.3 STREET	ADDRESS	'	<u> </u>		
CITY-ST-ZIP	CONT. 1 MATERIAL TO THE TAXABLE TO T		2. 4 CITY~S	ST-ZIP				
TITLE	D	DELETE	3.1 TITLE		İ		Change	Addition
NAME	AUSTIN, JOYCE		3.2 NAME		1			}
STREET ADDRESS	7910 S 86TH E AVE TULSA OK		3.3 STREET			7	4133	
CITY-ST-ZIP TITLE	TOLON OIL	DELETE	3.4. CITY-5	51 - ZIP	· · · · · · · · · · · · · · · · · · ·	_	☐ Change	☐ Addition
NAME			4. 2 NAME		! !		-	
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	<u> </u>			
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME STORET ADDRESS			5.2 NAME	LDD05500				
STREET ADDRESS			5.3 STREET 5.4 CITY - S	1	1			
CITY-ST-ZIP TITLE	WALLEY TO THE TOTAL THE TO	DELETE	6.1 TITLE	1-217			Change	Addition
NAME			6.2 NAME					_
STREET ADDRESS			6.3 STREET	ADDRESS	:			ĺ
CITY-ST-ZIP			6.4 CITY-S					
14. I hereby o	ertify that the information supplied	with this filing does not qualify for	the exemp	tion stated in	Section 119.07(3)(i), Florid	la Statutes. I further ce	rtify that the	information

4. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(0), Florida Statutes, 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

John D. Drey

Delle Dem

1/16/98

561-223-8561