FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -7 PM 4:28

DOCUMENT # 718445 (0)

1. Corporation Name
BEZALEL WORLD OUTREACH, INC.

Principal Place of Business	Mailing Address
11621 CARROLLWOOD DR. TAMPA FL 33618	11621 CARROLLWOOD DR. TAMPA FL 33618

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/05/1970
3a. Date of Last Report: 01/24/1994
4. FEI Number: 23-7248591 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

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)

9. Name and Address of Current Registered Agent

NELSON, GARY G.
11621 CARROLLWOOD DR.
TAMPA FL 33168

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Gary Nelson, Gary Nelson, President DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	CROWELL, KENNETH	1.2 NAME	
STREET ADDRESS	P. O. BOX 1589 N/A	1.3 STREET ADDRESS	
CITY-ST-ZIP	TIBERIAS IS	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	KENT, HAROLD	2.2 NAME	
STREET ADDRESS	11637 VILLAREAL DE AVILA	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	STD ☒ Change ☒ Addition
NAME	FOWLER, PAMELA	3.2 NAME	Donald White
STREET ADDRESS	33133 LAKE ELLEN DR.	3.3 STREET ADDRESS	19515 Deer Lake Road
CITY-ST-ZIP	TAMPA FL	3.4 CITY-ST-ZIP	Lutz, FL 33549
TITLE	P	4.1 TITLE	☐ Change ☐ Addition
NAME	NELSON, GARY	4.2 NAME	
STREET ADDRESS	11621 CARROLLWOOD DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, BARRY	5.2 NAME	
STREET ADDRESS	705 BARBERRY PL	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	D ☐ Change ☒ Addition
NAME	Maass, Paul	6.2 NAME	Maass Paul
STREET ADDRESS		6.3 STREET ADDRESS	9231 Kings Ridge Dr.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Tampa, FL 33617

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Gary Nelson, Gary Nelson, President 1/31/95 (813) 933-8111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0064823