## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 722445

(4)

OVER THE ROAD EVANGELISM, INC.  Principal Place of Business  1500 W VIRGINIA LN CLEARWATER FL 34619 US  CLEARWATER FL 34619 US			)	3. Date Incorporated or Qualified 01/14/1972	1 8 8 1 9 1 9 1 9 1 9 1 9 1 9 1 9 1 9 1
				4. FEI Number 23-7226989	Applied For Not Applicable
2. Principal P	lace of Business	2a. Mailing Address 26 /500 W VIRG /	alca IN	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<i>w.rn</i> ~	6. Election Campaign Financing	\$5.00 May Be
22   27   City & State   City & State		City & State		Trust Fund Contribution	Added to Fees
23		28 CLERWATER FL		7. Is this nonprofit corporation a homeowners association?	
Zip 24	Country 25	Zip., 25.0	Country US	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
27	g. Name and Address of Curre		~ 4	10. Name and Address of New Registers	
81 Name					
ROBINSON, DANIEL T.			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
1500 W VIRGINIA LN CLEARWATER FL 34619			B3		
			84 City		85 Zip Code
dd Discussion	to the sections of Cartings C17.00	00 and 017 4500 Florida Florida		F	L     33754
office or r agent. I a SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the oblig Stgnalure, typed or printed name of registered as		ithorized by the corporation Statutes.  Registered Agent signature regula	oration submits this statement for the purposition's board of directors. I hereby accept the a	1
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	ROBINSON, DANIEL T		1.2 NAME		
STREET ADDRESS	1500 W. VIRGINIA LN.		1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34619 ST	DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE NAME	PEACE, RICHARD	otter	2.1 TITLE 2.2 NAME		Onalige Addition
STREET ADDRESS	6197 IVEY HILL LN.		2.3 STREET ADORESS		
City-ST-ZIP	BROOKSVILLE FL		2.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	3.1 TITLE		Change Addition
NAME	HOGLE, ROGER P		3.2 NAME		
STREET ADDRESS	924 CENTER ROAD		3.3 STREET ADDRESS		
CITY - ST - ZIP	CONNEAUT, OH 00000		3.4. CITY+ST-ZIP		
TITLE	D DICHODE WILLIE O	☐ DELETE	4.1 TITLE		Change Addition
NAME	DISMORE, WILLIS G 2583 COUNTRYSIDE BLVD.		4. 2 NAME		
STREET ADDRESS CITY-ST-ZIP	CLEARWATER, FL 00000		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		Change Addition
NAME	RALSTON, DONALD	<del></del>	5.2 NAME		
STREET ADDRESS	2265 VANDERBUILT		5.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER, FL 00000		5.4 CITY-ST-ZIP		
TITLE	D	DELETE	6.1 TITLE		Change Addition
NAME	MCCLAMMA, DAVID		6.2 NAME		
223GOOD TAXATO	2050 MAGNOLIA DR		6.3 STREET ADDRESS		

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 of 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 changod, from an attachment with an address.

SIGNATURE: (1) Ita luma

4/20/98

8137991531

**FILED** 

Apr 30 1998 8:00am

Secretary of State