NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 737547

1. Corporation Name

WORLD RADIO MISSIONARY FELLOWSHIP, INC.

Principal Place of Business										
1065 GARDEN OF THE GODS										
COLORADO SPRINGS FL 90807-3405										
II ¢										

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

C/O DOUGLAS C. PETERS P O BOX 39800

COLORADO SPRINGS CO 80949-9800

26

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90072 009 ****70.00



3. Date Incorporated or Qualifed

12/14/1976

59-0939206

4. FEI Number

			27					59-0939206		l No	t Applicable
City & State	e	 	City	City & State				5. Certificate of Status Desired	X	\$8.75 /	Additional aguired
13											<u> </u>
Zip	Country Zip				Country 30			6. Election Campaign Financing		\$5.00	May Be to Fees
								Trust Fund Contribution	Dlatenad		to rees
	9. Name a	and Address of C	rrent Registere	d Agent			*1	10. Name and Address of New	KeBistered	-gent	
		·			ľ	B1	Name				
MORGAN, CHARLES O JR.						B2	Street Add	Iress (P.O. Box Number is Not Accep	table)		
1300 NW 167TH STREET MIAMI FL 33169											<u> </u>
						B3					
	• • • • • • • • • • • • • • • • • • • •				-	B4	City			85 Zip	Code
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office or n	registered age ım familiar witl	nt or both in the S	State of Florida. Subligations of, Sec	euch change was au ction 617.0503, Flor	itnonzeti i ida Statut	es.	ne corporau	ed when reinstating)	DATE	al ean Mart	
12.	Signature, typeo c		S AND DIRECTO		13.			ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECTO	RS IN 12
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NAME		CLINE, RONALD A				ΛE					
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		CUADOR 00000			1.4 CITY		· ·				
CITY-ST-ZIP	SD SD	DOADON GOOD		☐ DELETE	2.1 TITL					Change	☐ Addition
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NAME	l i_		ane poan				ADDRESS		•	•	
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NAME), DWITE M			4. 2 NAI	ME		· · · · · · · · · · · · · · · · · · ·		海流性等等	11871181
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TITLE	VP			☐ DELETÉ	5.1 TITL					Change	☐ Addition
NAME	ALLEN, JA				5.2 NA		ļ				
STREET ADDRESS		e villalengua					ADDRESS				
CITY-ST-ZIP	QUITO EC)			5.4 CIT		-ZIP				
TITLE				☐ DELETE	6,1 TITL	E				Change	☐ Addition
NAME		_			6.2 NAM	ME		en e			
STREET ADDRESS		•			6.3 STR	REET /	ADDRESS				
OUTS OF THE	1				6.4 CIT						
14. I hereby (certify that the	information suppli	ed with this filing	does not qualify for	the exem	notic	on stated in	Section 119.07(3)(i), Florida Statutes	. I further ce	tify 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

Dauglas CO PetersJanuary 15,

719/590-9800

Applied For

Not Applicable