## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 75554

1. Corporatio	MENT # <b>755542</b> Word Ministries, Inc.	? (8)			t gener leger bren bren brit en er	MON OCH BION BYRK ROW LENG
61 15			······································			
Principal Plac	e of Business	Mailing Address				
: Terry Sumpall Ganyay 19, South - P.O. Box 1394 Ross City Fl 32628		% TERRY SUMRALL HIGHWAY 19. SOUTH - P.O. BOX 1394 CROSS CITY FL 32628-1394		Date Incorporated or Qualified		
					12/16/1980	06/07/1996
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 05-0005500	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			\$8.75 Additional	
2		27		5. Certificate of Status Desired	Fee Required	
City & Stat	e <del>0</del>	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
3 Zip	Country	Zip	Cou	intry	This corporation has liability for Intangility	
4	25	29	30		Florida Statutes Yes	□ No
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registers	d Agent
MOLEOD IEAN I						
MCLEOD, JEAN L HORSESHOE ROAD			İ	82 Street Ac	Idress (P.O. Box Number is Not Acceptable)	
P. Q. BOX 561			ì	B3		
CROSS (	CITY FL 32628			84 City		. 85 Zip Code
44 0	10.00	2 and 647 4EOO Elosida Statu	taa dha al	1 1 1	F	
office or i	registered agent, or both, in the State	of Florida, Such change was	authorize	d by the corpo	proporation submits this statement for the purpose ration's board of directors. I hereby accept the a	ppointment as registered
	am taniliar with, and accept the obliga	itions of, Section 617.0503, Fi	iorida Stai	utes.		
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable. (NO	TE: Registere	d Agent signature re	quired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD company tropy to they	☐ DELETE	1,1 T/ 1,2 N			Change Addition
NAME STREET ADDRESS :	SUMRALL, TERRY & JUDY PO BOX 1394,KRESSMAN ST.			FREET ADDRESS		
CITY-ST-ZIP	CROSS CITY FL			TY-ST-ZIP		j
TITLE	D	☐ DELETE	2.1 TI			☐ Change ☐ Addition
NAME	DAVIS, FRANK & AMANDA		2.2 N	AME		
STREET ADDRESS	RT 7 BOX 87 ROCKY CRK RD		1	REET ADDRESS	•	
CITY-ST-ZIP	LIVE OAK FL	☐ DELETE		TY-SY-ZIP		☐ Change ☐ Addition
TITLE NAME	D CHAMPION, BOB & CAROL	LJ DELEIE	3.1 TI 3.2 N			TT custife TT vocinos
STREET ADDRESS	913 PELICAN BAY DR	÷	1	TREET ADDRESS		İ
CHY-SI-ZIP	DAYTONA BEACH FL			TY-ST-ZIP		
TITLE	SD	DELETE	4.1 T	TLE		Change Addition
NAME	WOLFE, BENNICE		4.2 N			ļ
STREET ADDRESS	RT 4 BOX 107 TOUCHTON RD	1		REET ADDRESS		į
CITY-ST-ZIP TITLE	LIVE OAK FL D	☐ DELEYE	4.4 C	TY-ST-ZIP		Change Addition
NAME	MUSGROVE, CHRIS & TERRI	- >	5.1 N	-		
STREET ADDRESS	805 SW MARYMAE ST.		4	REET ADDRESS		
CITY-ST-ZIP	LIVE OAK FL		5.4 CI	TY-ST-ZIP		
TITLE	D	DELETE	6,1 TI			☐ Change ☐ Addition
NAME	MCLEOD, JEAN		6.2 N			
STREET ADDRESS	HORSESHOE ROAD			TREET ADDRESS		ļ
CITY-S1-ZIP 14. Ldo herel	CROSS CITY FL by certify that the information supplied	with this filing does not qual		ry-st-zip exemption stat	ted in Section 119.07(3)(i), Florida Statutes. I furt	her certify that the
informatio	on indicated on this annual report or s	upplemental annual report is the raceiver or trustee empor	true and a	accurate and the execute this rep	nat my signature shall have the same legal effect oort as required by Chapter 617, Florida Statutes	as if made under oath; that

SIGNATURE

SIGNATURE AND THE OR PRINTED NAM

- BLAND OFFICER OR DIRECTOR

5-1-97

**FILED** 

May 19 1997 8:00am

Secretary of State

Daytime Phone #0011527