FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 760142

1. Corporation Name

THE GO BETWEEN MINISTRY, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

1038 CHURCHILL CIRCLE S.. WEST PALM BEACH FL 33405

2. Principal Place of Business

Suite, Apt. #, etc..

SIGNATURE: 4

1038 CHURCHILL CIRCLE S.. WEST PALM BEACH FL 33405

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90182 017 ****70.00



Applied For



3. Date Incorporated or Qualifed

09/23/1981

4. FEI Number

Suite, Apr.	# , 5101.	27	Odito, 7 4				59- 2155830		Not	Applicable
City & State	e	28	City & State				5. Certifcate of Status Desired	N	\$8.75 Ac	
Zip	Country		Zip		Country		6. Election Campaign Financing		\$5.00 M	•
25 29 30						·	Trust Fund Contribution 10. Name and Address of New I	Registered		1 663
	9. Name and Address of Curre	nt Kegis	tered Agent		81	Name	To. Hame and Address of New A	togistored		
						1100				
UNDERWOOD, JIM					82	Street Add	ress (P.O. Box Number is Not Accept	able)		
1038 CHRUCHILL CIRCLE S.					83					
WEST PALM BCH FL 33405					03					
	:				84	City		FL	85 Zip C	ode
			47 4500551-14	0:4 1 4	b		tion outprite this statement for the		changing its	registered
office or r	to the provisions of Sections 617.05 egistered agent, or both, in the State im familiar with; and accept the oblig	a of Florid	ia. Such chanc	e was authol	rizea ov	the corporat	poration submits this statement for the ion's board of directors. I hereby acce	pt the appoi	ntment as reg	istered
SIGNATURE	· · · · · · · · · · · · · · · · · · ·	-7 - 7 100	7	MOTE. P	stared Aces	nt elementure securio	ed when reinstating)	DATE		
12.	Signature, typed or printed name of registered ag-				13.	it aignature requii	ADDITIONS/CHANGES TO OF		D DIRECTOR	RS IN 12
TITLE	PD	NO DINE	□ DE	LETE	1.1 TITLE				Change	Additio
NAME	UNDERWOOD, JIM				1.2 NAME					
						TADORESS		÷		
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	STD LINDEDWOOD JOANN				2.2 NAME					
NAME	UNDERWOOD, JOANN =1038:CHURCHILL.CIB., C.					TADDRESS				
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	VD				3.2 NAME					-
NAME	WEST, DANIEL					TADORESS				
STREET ADDRESS	1				3.4. CITY-5					
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STREET ADDRESS					6.4 CITY-S	· [
CITY-ST-ZIP	and it is that the information our limit	aith thin f	ilina doce ast a				Section 119 07(3)(i) Florida Statutes	I further cer	tify that the in	formation
indicated officer or	on this annual report or supplement	tal annual ceiver or t	l report is true a trustee empowe	and accurate ared to execu	and thaute this r	it my signatu report as regi	Section 119.07(3)(i), Florida Statutes, re shall have the same legal effect as uired by Chapter 617, Florida Statutes	it made und	er oatn: tnat i	am an