

FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 813267 (2)
 1. Corporation Name
MISSIONARY BOARD OF THE BRETHREN CHURCH



Principal Place of Business 524 COLLEGE AVENUE ASHLAND OH 44805	Mailing Address 524 COLLEGE AVENUE ASHLAND OH 44805
---	---

3. Date Incorporated or Qualified 12/22/1958	
4. FEI Number 34-0718394	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
	Country 30

9. Name and Address of Current Registered Agent

LERSCH, PHIL
6301 56TH AVE N
ST PETERSBURG FL 33709

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS

TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	CURTIS, WILLIAM
STREET ADDRESS	1540 W. CHAPALA DRIVE
CITY-ST-ZIP	TUCSON AZ
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	BEST, RANDY
STREET ADDRESS	6605 N. ALTURAS
CITY-ST-ZIP	STOCKTON CA
TITLE	P <input type="checkbox"/> DELETE
NAME	GILMER, ARDEN
STREET ADDRESS	619 PARK ST
CITY-ST-ZIP	ASHLAND OH
TITLE	D <input type="checkbox"/> DELETE
NAME	HUTCHINSON, RICHARD
STREET ADDRESS	5085 OTTER CREEK DRIVE
CITY-ST-ZIP	MILLEDGEVILLE IL
TITLE	T <input type="checkbox"/> DELETE
NAME	GENTLE, STANLEY
STREET ADDRESS	1031 EL MARNA
CITY-ST-ZIP	ASHLAND OH
TITLE	D <input type="checkbox"/> DELETE
NAME	STOFFER, DALE
STREET ADDRESS	2217 OAKCREST LANE
CITY-ST-ZIP	ASHLAND OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DREYER, CANDY
1.3 STREET ADDRESS	2480 W PLACITA ALGODON
1.4 CITY-ST-ZIP	TUCSON, AZ 85741
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	SCHMIEDT, ALAN
2.3 STREET ADDRESS	20687 S MANTECA ROAD
2.4 CITY-ST-ZIP	MANTECA, CA 95336
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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: *Stanley Gentle* **STANLEY GENTLE, TREASURER** 4/28/98 419-289-1708

CR2E037 (10/97)

ADDENDUM

MISSIONARY BOARD OF THE BRETHREN CHURCH
524 College Avenue
Ashland, OH 44805

#12 Directors and Officers

<u>NAMES OF DIRECTORS</u>	<u>TITLE</u>	<u>STREET ADDRESS</u>	<u>CITY & STATE</u>
BLACK, James F.	D	8996 S 500 W	Wabash, IN 46992
BRITTON, Cathy	D	710 N. Woodlawn Blvd.	Derby, KS 67037
HOLLINGER, James	D	59147 Lower Dr, R7	Goshen, IN 46526
NIES, Curt	D	110 W Church Street	Masontown, PA 15461
MILLER, Fred	D	RR 1, Box 421	McGaheysville, VA 22840
SMITH, Reilly	S	1055 W. Main	Ashland, OH 44805
STONE, David	D	150 N. Shade	Sarasota, FL 34237
WINFIELD, Kay	D	630 Buena Vista	Ashland, OH 44805