


FILE NOW: FILING FEE IS \$61.25

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Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **858297** (5)
1. Corporation Name
BILL BASANSKY MINISTRIES, INC.

Principal Place of Business
**12400 PLANTATION RD
FT MYERS FL 33912-1346
US**

Mailing Address
**P O BOX 7126
FT MYERS FL 33911-126
US**

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 11/01/1983	
4. FEI Number 23-7330071	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
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 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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**SHAFER, CARMEN
12400 PLANTATION RD.
FT MYERS FL 33912-1346**

10. Name and Address of New Registered Agent	
81 Name Beatrice A. Basansky	
82 Street Address (P.O. Box Number is Not Acceptable) 12400 Plantation Rd.	
83	
84 City Ft Myers	85 Zip Code FL 33912

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 Beatrice A. Basansky **Beatrice A. Basansky STD** **April 8, 1998**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	PD BASANSKY, WILLIAM
STREET ADDRESS	12400 PLANTATION RD.
CITY-ST-ZIP	FT MYERS FL
TITLE	<input type="checkbox"/> DELETE
NAME	EVD BASANSKY, BEATRICE ANN
STREET ADDRESS	12400 PLANTATION RD.
CITY-ST-ZIP	FT MYERS FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	ASTD SHAFER, CARMEN A
STREET ADDRESS	12400 PLANTATION RD.
CITY-ST-ZIP	FT MYERS FL
TITLE	<input type="checkbox"/> DELETE
NAME	STD BASANSKY, ERIC WILLIAM
STREET ADDRESS	12400 PLANTATION RD
CITY-ST-ZIP	FT MYERS FL
TITLE	<input type="checkbox"/> DELETE
NAME	VD BASANSKY, JERRY T.
STREET ADDRESS	89 CHESTNUT ST
CITY-ST-ZIP	TORONTO ON
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	STD Beatrice A. Basansky
2.3 STREET ADDRESS	12400 Plantation Rd.
2.4 CITY-ST-ZIP	Ft. Myers FL 33912
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	VD Eric William Basansky
4.3 STREET ADDRESS	12400 Plantation Rd.
4.4 CITY-ST-ZIP	Ft Myers FL 33912
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: William Basansky **REQUIRED**

4/8/98

CR2E037 (10/97)