FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 18 1998 8:00am Secretary of State

DOCUMENT # (4) CERTAIN SOUND MINISTRIES, INC. Principal Place of Business Mailing Address MEDINGTON. HOWARD WEDINGTON, HOWARD 1055 EDGEWATER DRIVE 1055 EDGEWATER DRIVE DO NOT WRITE IN THIS SPACE ORLANDO FL 32804 ORLANDO FL 32804 3. Date Incorporated or Qualified 02/16/1989 2. Principal Place of Business 2a. Mailing Address Applied For 59-2947144 Not Applicable 21 26 Suite, Apl. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be П Added to Fees 28 Trust Fund Contribution 23 Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **EDINGTON, HOWARD** 1055 EDGEWATER DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32804 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607 0502 and 607,1508, 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 607,0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11 TITLE **EDINGTON, HOWARD** NAME 1.2 NAME 1055 EDGEWATER DRIVE STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADORESS 3.3 STREET ADDRESS CITY - ST - ZIP 34. CITY-ST-7IP DELETE 4 1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST- ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE 6 1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 64 CITY-ST-ZIP

14. 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 supplimental 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 ergowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE:

J. Howard Edington

february 13, 1998 (407) 423

CR2E034 (10