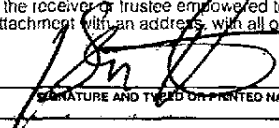


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # N02000003413		
1. Entity Name A. P. E. L. MINISTRIES, INC.		
Principal Place of Business 2360 KINGS RD JACKSONVILLE, FL 32209		Mailing Address 2360 KINGS RD JACKSONVILLE, FL 32209
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SMILEY, KAREN 11756 CHERRY BARK DR E JACKSONVILLE, FL 32218		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____		
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD DIAMOND, TOM E 4143 W MARLIN DR JACKSONVILLE, FL	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DV STOKES, KEN 2360 KINGS RD JACKSONVILLE, FL	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DST SMILEY, KAREN 11756 CHERRY BARK DR E JACKSONVILLE, FL 32218	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered		
SIGNATURE:  KEN STOKES		1.12.04 94-353-2574 Date Daytime Phone



01122004 No Chg-NP CR2E037 (10/03)

4. FEI Number 03-0507092	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

000000010484
01/22/04-80033-018.61.25

**DO NOT WRITE
IN THIS SPACE**