

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N02915** (9)

1. Corporation Name

**EAST-WEST GOSPEL MISSION, INC.**



Principal Place of Business

Mailing Address

**6254 TOWNSEND RD  
JACKSONVILLE FL 32244  
US**

**376-5 MAGUIRE VILLAGE  
GAINESVILLE FL 32603  
US**

3. Date Incorporated or Qualified  
**05/07/1984**

3a. Date of Last Report  
**04/28/1995**

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc. **26** *376-5 Maguire Village*

**22** City & State

**27** Suite, Apt. #, etc.

**23** City & State

**28** City & State

**24** Zip **25** Country

**29** Zip **30** Country

4. FEI Number

**59-2447421**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LIM, TIMOTHY H  
376-5 MAGUIRE VILLAGE  
GAINESVILLE FL 32603**

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD  
LIM, DR. KYUNG CHUL**  
STREET ADDRESS **4412 STONINGTON CIR.**  
CITY - ST - ZIP **DUNWOODY GA**

TITLE ☐ DELETE

NAME **VSD  
UPTON, DR. WAYNE W.**  
STREET ADDRESS **6254 TOWNSEND RD**  
CITY - ST - ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE

NAME **TD  
LIM, MR TIMOTHY H**  
STREET ADDRESS **376-5 MAGUIRE VILLAGE**  
CITY - ST - ZIP **GAINESVILLE FL**

TITLE ☐ DELETE

NAME **D  
TRANHAM, MR. BUDDY W.**  
STREET ADDRESS **17991 LEM TURNER RD**  
CITY - ST - ZIP **JACKSONVILLE FL**

TITLE ☐ DELETE

NAME **D  
LEE, REV. KANG HO**  
STREET ADDRESS **4081 OAK FOREST CIR.**  
CITY - ST - ZIP **MARIETTA GA**

TITLE ☐ DELETE

NAME **D  
LIM, MRS. JUNG SOOK**  
STREET ADDRESS **4412 STONINGTON CIR.**  
CITY - ST - ZIP **DUNWOODY GA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**400001797044**  
**-04/26/96--01100--043**  
**\*\*\*61.25**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Apr 22, 96* **1352546-5445**  
Date Daytime Phone #

CR2E037 (12/95)

*OK 4-26-96*