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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED May 20 1997 8:00am Secretary of State

1. Corporation	MENT # NO2915 EST GOSPEL MISSION, INC	()				
Principal Place	of Business	Mailing Address				
6254 TOWNSEND RD JACKSONVILLE FL 32244 US		376-5 MAQUIRE VILLAGE GAINESVILLE FL 32803-2033 US				
55		00		3. Date Incorporated or Qualified 05/07/1984	3a. Date of Las 04/26/1	
2. Principal Place of Business		2a. Mailing Address	alrone	4. FEI Number 59-2447421		Applied For Not Applicable
Suite, Apt	V. etc.	Suite, Apt. #, etc.	<i>W</i>	5. Certificate of Status Desired	A	5 Additional Required
City & State		City & State		6. Election Campaign Financing	\$5.0	00 May Be
3	Country	28	I Country	Trust Fund Contribution		ed to Fees
Zip 24]	Country 25	Zip 29	Country 30		Yes No	er 6. 199.032,
	9. Name and Address of Current	Registered Agent	art	10. Name and Address of New D	egistered Agent	
1111	New (1/2 1 1		81 Name •	Timothy H/L	-iM	
LIM, TIMOTHY H 376-5 MAGUIRE VILLAGE			82 Street Add	ress (P.O. Box Number is Not Accepte	11/1092	_
	ILLE FL 32603		83	Trace III To	1110	
			84 City	WESVIEW / FA	FL 85 2	ip Code
11. Pursuant t	o the provisions of Sections 617.0502	and 617.1508, Florida Statu	ites, the above-named corp	poration submits this statement for the	purpose of changin	g its registered
office or re agent. I ar	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was tions of Section 61, 0503, F	authorized by the corpora lorida Statu <u>t</u> es.	poration submits this statement for the tion's board of directors. I hereby acce	ept the appointment	as registered
SIGNATURE _	Xame Ou	ul O hus	Wesider		4 (2)	<u> </u>
12.	Signature types of printed name of registered agen OFFICERS AND		TE: Registrato Agent signature requ	red when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECT	IORS IN 12
TITLE	PD/	☐ DELETE	1.1 TITLE	7,000,000,000,000	☐ Chan	
NAME	LIM, DR. KYUNG CHUL		1.2 NAME			
STREET ADDRESS	4412 STONINGTON CIR.		1.3 STREET ADORESS			
CITY-ST-ZIP	DUNWOODY GA	DELETE	1.4 CITY-ST-ZIP		☐ Chan	ge Addition
TITLE NAME	VSD	T DECEIE	2.1 TITLE 2.2 NAME		L Gran	No FT VOCULION
STREET ADDRESS	UPTON, DR. WAYNE W. 6254 TOWNSEND RD		2.3 STREET ADDRESS	· .	<i>:</i>	
CITY-ST-7IP	JACKSONVILLE FL		2. 4 CITY-SY-ZIP			
TOTLE	TD	DELETE	31 TITLE		☐ Chan	ge Addition
NAME	LIM, MR TIMOTHY H		3.2 NAME			
STREET ADDRESS	376-5 MAGUIRE VILLAGE		3.3 STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL		3.4. CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		4 1 811
TITLE	D	DELETE	4.1 TITLE		L Chan	ige 🔲 Addition
NAME	TRANTHAM, MR. BUDDY W.		4. 2 NAME			
STREET ADDRESS	17991 LEM TURNER RD		4.3 STREET ADDRESS			
CITY - ST - ZIP	JACKSONVILLE FL D	DELETE	4.4 CITY-SY-ZIP 5.1 TITLE		☐ Chan	nge
NAME	LEE, REV. KANG HO		5.2 NAME			• —
STREET ADORESS	4081 OAK FOREST CIR.		5.3 STREET ADDRESS			
CITY-ST-ZIP	MARIETTA GA		5.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	6.1 TITLE	······································	☐ Chan	ge Addition
NAME	LIM, MRS. JUNG SOOK		6.2 NAME			
STREET ADDRESS	4412 STONINGTON CIR.		6.3 STREET ADDRESS		i	
CITY-ST-ZIP	DUNWOODY GA		6.4 CITY-ST-ZIP			, ,
information I am an of	n indicated on this annual report or &	ipplemental annual report is the receiver or trustee empo	true and accurate and that wered to execute this repo	d in Section 119.07(3)(i), Florida Statul t my signature shall have the same leg art as required by Chapter 617, Florida	nal effect as if made	i under oath: 1h