

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N07319

(9)

1. Corporation Name

EAGLES WAY MINISTRIES, INC.



Principal Place of Business

Mailing Address

6816 A AVENUE
ST AUGUSTINE FL 32084
US

18 DORSEY FORD ROAD
RAYVILLE LA 71269
US

3. Date Incorporated or Qualified

01/25/1985

3a. Date of Last Report

04/03/1995

4. FEI Number

59-2495090

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONNER, BONNIE W
6816 A AVENUE
ST AUGUSTINE FL 32084

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BRIDGES, LATEN
STREET ADDRESS RT. 5 BOX 2110
CITY-ST-ZIP RAYVILLE LA ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

PD
Bridges, Laten
20 Dorsey Ford Road
RAYVILLE, LA. 71269

☒ Change

☐ Addition

TITLE VD
NAME WILLIAMS, BEVERLY L.
STREET ADDRESS 105 HOOVER ST.
CITY-ST-ZIP TALLULAH LA ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE STD
NAME BRIDGES, DOLLY
STREET ADDRESS RT. 5 BOX 2110
CITY-ST-ZIP RAYVILLE LA ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

ST
DOLLY BRIDGES
20 Dorsey Ford Road
RAYVILLE, LA. 71269

☐ Change

☐ Addition

TITLE D
NAME KELLER, AGNES
STREET ADDRESS 607 SOUTH ELM
CITY-ST-ZIP TALLULAH LA ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME NANCE, DIANNE (KING)
STREET ADDRESS 200 RIDGEDALE #29
CITY-ST-ZIP WEST MONROE LA ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Nance, Dianne (King)
306 Timberland Drive
MONROE, LA. 71203

☐ Change

☐ Addition

TITLE D
NAME NANCE, TIMOTHY
STREET ADDRESS 200 RIDGEDALE #29
CITY-ST-ZIP WEST MONROE LA ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

D
Nance, DR. Tim
306 Timberland Drive
MONROE, LA. 71203

☐ Change

☐ Addition

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

Date:

Daytime Phone #

CR2E037 (12/95)