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CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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DOCUMENT # N08907 (0)

1. Corporation Name
ADVENTURERS IN MINISTRY, INC.

Principal Place of Business	Mailing Address
4201 N. PEACHTREE RD SUITE 102 ATLANTA GA 30341 US	P.O. BOX 888638 ATLANTA GA 30339 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/24/1985
3a. Date of Last Report: 04/04/1994
4. FEI Number: 59-2544378 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
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 7408 YUMA WAY	26 P.O. BOX 81746
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: BAKERSFIELD, CA	28 City & State: BAKERSFIELD, CA
24 Zip: 93308 25 Country: U.S.A.	29 Zip: 93380 30 Country: U.S.A.

9. Name and Address of Current Registered Agent

BRADLEY, FRANCIS M.
427 TIMBERLAKE DRIVE
MELBOURNE FL 32940

10. Name and Address of New Registered Agent

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	11 TITLE	C ☒ Change ☐ Addition
NAME	FRANCIS, JOAN	12 NAME	BROWN, DONALD
STREET ADDRESS	1275 PILGRIM DR	13 STREET ADDRESS	7408 YUMA WAY
CITY-ST-ZIP	EDWARDS CO	14 CITY-ST-ZIP	BAKERSFIELD, CA 93308
TITLE	D	21 TITLE	D ☒ Change ☐ Addition
NAME	BROWN, DIANE	22 NAME	BROWN, DIANE
STREET ADDRESS	1652 MANNASSET FARM CT	23 STREET ADDRESS	7408 YUMA WAY
CITY-ST-ZIP	ATLANTA GA	24 CITY-ST-ZIP	BAKERSFIELD, CA 93308
TITLE	ST	31 TITLE	S ☒ Change ☐ Addition
NAME	RIPLEY, ETHEL	32 NAME	RIPLEY, ETHEL
STREET ADDRESS	338 SEEWEE CIRCLE	33 STREET ADDRESS	338 SEEWEE CIRCLE
CITY-ST-ZIP	MT. PLEASANT SC	34 CITY-ST-ZIP	MT. PLEASANT, SC 29465
TITLE	D	41 TITLE	T ☒ Change ☐ Addition
NAME	BRADLEY, FRANCIS M.	42 NAME	McCOOL, GERALD
STREET ADDRESS	427 TIMBERLAKE DRIVE	43 STREET ADDRESS	8159 TIANA
CITY-ST-ZIP	MELBOURNE FL	44 CITY-ST-ZIP	VENTURA CA 93003
TITLE	D	51 TITLE	D ☒ Change ☐ Addition
NAME	GRIFFITH, HARRY C	52 NAME	CRANBERRY, LANELEY
STREET ADDRESS	633 WORTHINGTON DR	53 STREET ADDRESS	MOCKINGBIRD DR.
CITY-ST-ZIP	WINTER PARK FL	54 CITY-ST-ZIP	EDGARTOWN MA 02539
TITLE	D	61 TITLE	D ☒ Change ☐ Addition
NAME	BROWN, DONALD	62 NAME	ANDREWS, NANCY
STREET ADDRESS	1625 MANNASSETT FARM CT	63 STREET ADDRESS	308 ACORN CT
CITY-ST-ZIP	ATLANTA GA	64 CITY-ST-ZIP	VACAVILLE, CA 95688

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)(i), 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: _____ March 21, 1995 (805) 588-9867
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR — Date — Daytime Phone # 588-9867

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