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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N12304

1. Corporation Name

JORDAN-SHARP MINISTRIES, INC.

Principal Place of Business 1403 A 57TH AVE W

Mailing Address

FILED Apr 20, 1999 8:00 am § Secretary of State

04-20-1999 90068 006 ****61.25

1403 A 57TH BRADENTON			HILLCREST CR ANKLIN NC 28734									
	Place of Business	<u> </u>	Mailing Address				3. Date Inco 11/27/1	rporated or Qualifed	•			
21 Suite, Apt.	#, etc	26	Suite, Apt. #, etc.				4. FEI Numb	er		>		ied For Applicable
City & Star	te		City & State				5. Certifcate	of Status Desired			75 Ad e Requ	ditional uired
Zip 24	Country 25		Zip	Соц 30	intry			campaign Financing d Contribution		•	.00 м ded to	• 1
- 	9. Name and Address of	Current Registe	ered Agent				10. Name an	d Address of New	Registered	Agent		
			-		81	Name			•			
WITT, RONALD 1400 4TH AVE. WEST BRADENTON FL 34205					82	Street Addre	Address (P.O. Box Number is Not Acceptable)					
					83							
					84	City			FL	85	Zip Co	ode
	to the provisions of Sections 6 registered agent, or both, in the		Cush shangs was a	uthorized	d by	the compretion	n's hoard of dire	ctors. I hereby acce	ot the appoi	ntment a	as regis	stered i
agent. I a	am familiar with, and accept the Signature, typed or printed name of regis	e obligations of, s	applicable. (NOTE	: Registered	utes.	t signature required	when reinstating)		DATE			
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CITY-ST-ZIP 14. 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 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 managed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

NAME: \\ \JE_1 \\

STREET ADDRESS

TITLE

DELETE

☐ Addition

Change