## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N13707

(7)

...IN THE NAME OF JESUS MINISTRIES, INC.

IN THE NAME OF JESUS MINISTRIES, INC.							
Principal Place of Business		Mailing Address			T (ABS)(tet ab) (1860 bitt) faatt batti teet atatt atatt atatt atatt	481	
C/O STEPHANNIE L. DACOSTA. ATTY.  1980 N. ATLANTIC AVE SUITE 602  1980 N. ATLANTIC AVE SUITE 602  COCOA BEACH FL 32931  COCOA BEACH FL 32931			AVE., SUITE 602		3. Date Incorporated or Qualified 03/06/1986		
CUCUA BEACH	PL 32831	COCON BEACH FL	32831		4. FEI Number Applied F		
				,	<b>59-2859186</b> Not Appli		
21	ace of Business	2a. Mailing Addre			5. Certificate of Status Desired S8.75 Addition Fee Required		
Suite, Apt. #, etc.		Suite, Apt. #, (	Suite, Ap1. #, etc.		B. Election Campaign Financing     Trust Fund Contribution     Added to Fees		
City & State	8	City & State			7. Is this nonprofit corporation a homeowners association?		
Zip	Country	28 Zip	Count	v			
24	25	29	30	y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	,	
24		of Current Registered Agent	1901		10. Name and Address of New Registered Agent		
			8	Name			
	a, stephannie L. Prth atlantic avenue	•	8	Street /	Address (P.O. Box Number is Not Acceptable)		
SUITE 60		=	8	3			
COCOA	BEACH FL 32931		8	City	85 Zip Code		
					FL 8 25 2000	h	
11. Pursuant i	to the provisions of Sections egistered agent, or both, in	is 617,0502 and 617,1508, Florid in the State of Florida. Such chanc	a Statutes, the abo se was authorized I	ve-named by the corp	I corporation submits this statement for the purpose of changing its regist poration's board of directors. I hereby accept the appointment as registed	terea sted	
agent. I a	m familiar with, and accept	the obligations of Section 617.0	503, Florida Statut	s.			
SIGNATURE .			(NOTE: Bealstand A	and shoots we	e required when reinstating) DATE		
12.		registered agent and title if applicable.	13.	Serie a Chimitora	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
TITLE	D	☐ DEI				ddition	
NAME	O'BRIEN, HOLLIE L.		1.2 NAM	:			
STREET ADDRESS	1525 MINUTEMAN CS	SWY.#105	1.3 STRE	T ADDRESS			
CITY-ST-ZIP	COCOA BEACH FL	,.	1.4 CITY	ST-ZIP			
TITLE	PD	DEI	ETE 2.1 TITLE		Change A	ddition	
NAME	WITTBOLD, JANE C.		2.2 NAM	:			
STREET ADDRESS	500 CATALINA RD #3	306	2.3 STRE	T ADDRESS			
CITY-ST-ZIP	COCOA BEACH FL		2.4 CITY	-ST-ZIP	19		
TITLE	D	DÉI	LETE 3.1 TITLE		☐ Change ☐ A	ddition	
NAME	Bragg, Vivian		3.2 NAM				
STREET ADDRESS	657 ROCKLEDGE DR	ive	3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ROCKLEDGE FL		3.4. CITY	-ST-ZIP			
TITLE	D	☐ D€i	LETE 4.1 TITLE		☐ Change ☐ A	ddition	
NAME	smith, Jimmie		4. 2 NAM	ŧ	į		
STREET ADDRESS	104 RIDGECREST RD	)	4.3 STRE	ET ADDRESS			
CITY - ST - ZIP	LAGRANGE GA		4.4 CITY			449'	
TITLE	D	☐ DE			<del></del>	ddition	
NAME	QUINN, CAROLYN W		5.2 NAM		TO CONTRAL CONTRAL		
STREET ADDRESS	8755 HONEYSUCKLE		5.3 STRE	ET ADDRESS	TAL CLASION GOOCH		
CITY-ST-ZIP	CAPE CANAVERAL FI		5.4 CITY		DAHLONERA INA SON 33	adit'	
TITLE		DE:	LETE 6.1 TITLI		ı IV/I L) ∐ı Change ∠SL/	ddition	
					LATE WALL MANAGE		
NAME			6.2 NAM		782 CLAYTON GOOCH DAHLONEGA, GA 30533 MD Change MA IVANCHACK, MARC BOX 320735 "NA"		

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 changed, or on an attachment with an address/

SIGNATURE:

MSHW TWIR

4-4-98 (407)783-757

**FILED** 

Apr 17 1998 8:00am

Secretary of State

:R2E037 (10/97