

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 24 PH 3:04

DOCUMENT # **N15270** (4)

1. Corporation Name
MINISTRY SYSTEMS, INC.

Principal Place of Business Mailing Address
~~3072 N. LAKE ORLANDO PKWY 00000~~ ~~3072 N. LAKE ORLANDO PKWY 32008~~
~~PO BOX 608458 (32860)~~ ~~PO BOX 608458 (32860)~~
ORLANDO FL 32808-2203 ORLANDO FL 32808-2203
32860

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/04/1986** 3a. Date of Last Report **04/14/1994**
4. FEI Number **59-2706292** Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
3872 N. LK. Orlando Pkwy **P.O. Box 608458**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22. Suite, Apt. #, etc. 27. Suite, Apt. #, etc.

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23. City & State **Orlando Fl.** 28. City & State **Orlando Fl.**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

24. Zip **32808** 25. Country Country 29. Zip **32860** 30. Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

KENNEDY, LARRY W.
3872 N LAKE ORLANDO PKWY
ORLANDO FL 32808

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 *Larry W. Kennedy* DATE **1-16-95**

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PO	KENNEDY, LARRY W. 3872 N LAKE ORLANDO PKWY ORLANDO FL	1.1 TITLE PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE VSD	DOERR, JOSEPH 4242 GRANT BLVD ORLANDO FL	2.1 TITLE VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE VTD	REEVES, DWIGHT L. 1740 DAVID CRUM COURT LAKELAND FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 110.07(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: *Larry W. Kennedy* DATE: **1-16-95** **407-290-1597**