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Apr 16 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N17443** (5)

1. Corporation Name

**THE CORNERSTONE TELEVISION MINISTRY, INC.**

Principal Place of Business

Mailing Address

**3730 COCONUT CREEK PKWY  
STE 190  
COCONUT CREEK FL 33066  
US**

**PO BOX 935150A  
MARGATE FL 33093**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**10/21/1986**

4. FEI Number

**59-2733101**

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. Is this nonprofit corporation a homeowners association?

☐

Yes ☒ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐

Yes ☒ No

10. Name and Address of New Registered Agent

**ZIMMERMAN, LOUIS  
3730 COCONUT CREEK PKWY  
STE 190  
COCONUT CREEK FL 33066**

81 Name

**ANTHONY G VASQUEZ**

82 Street Address (P.O. Box Number is Not Acceptable)

**3730 COCONUT CREEK PKWY**

83

**SUITE 190**

84

**COCONUT CREEK FL**

85

**Zip Code  
33066**

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE

**04-4-98**

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**V  
ZIMMERMAN, LOUIS  
9971 NW 39 CT  
CORAL SPRGS FL**

TITLE ☐ DELETE

**D  
WARREN, WALTER  
7807 NW 68 TERRACE  
TAMARAC FL 33321**

TITLE ☒ DELETE

**TD  
ZIMMERMAN, LOUIS  
9971 NW 39TH CT.  
CORAL SPRINGS FL 33085**

TITLE ☐ DELETE

**D  
MCALPINE, CECILE  
9451 NW 40 ST  
CORAL SPRGS FL**

TITLE ☐ DELETE

**SD  
KAYLE, MILDRED  
1344 NW 4TH CT  
BOCA RATON FL**

TITLE ☐ DELETE

**D  
D'ANGELO, JOSEPH  
1123 SW 5TH ST.  
BOCA RATON FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**ANTHONY G. VASQUEZ  
6161 COUNTRY FAIR CIRCLE  
BOYNTON BEACH, FL. 33437**

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:

*[Signature]*

**04-6-98**

**970-7766**

CR2E037 (10/97)