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

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 13 1997 8:00am

Secretary of State

Daytime Phone # 0065742

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

N21427

(2)

**NEW HORIZON MINISTRY, INC.** 

# JUAN OCASIO ### JUAN OCASIO
OCALA FL 34472  OCALA FL 34472-2078  3. Date incorporated or Qualified (6/3W) 1987  3. Date incorporated or Qualified (6/3W) 1987  4. FEI Number 59-2836965  In Applied For Not Applicable Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Sind Address of Current Registered Agent  OCASIO, JUAN 83 TEAK LOOP  OCALA FL 34672  OCALA  City  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Sind Country  Sind Address of Current Registered Agent  OCASIO, JUAN 83 TEAK LOOP  OCALA FL 32672  OCALA FL 3477-2  Sind Address (P.O. Box Number is Not Acceptable)  Sind Address (P.O. Box Number is Not Acceptable)  Sind City  FL 85 Zip Code
2. Principal Place of Business 2. Applied For US/U4/1996 2. Principal Place of Business 3. Date Incorporated or Qualified US/U4/1996 3. Date of Last Report US/U4/1996 3. Date Incorporated or Qualified US/U4/1996 4. FEI Number 592836965 592836965 Not Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Requ
Suite, Apt. #, etc.  City & State  City & State  Zip  Country  Sign   Address of Current Registered Agent  OCASIO, JUAN  83 TEAK LOOP  OCALA FL 32672  OCALA  Suite, Apt. #, etc.  Suite, Apt. #, etc.
Suite, Apt. #, etc.  Suite, Apt. # etc.  City & State  City & State  City & State  Zip  Country  Zip  Country  Suite, Apt. # etc.  Country  Zip  Country  Suite, Apt. # etc.  City & State  City & State  City & State  Country  Zip  Country  Suite, Apt. # etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Suite, Apt. # etc.  City & State  City & State  City & State  City & State  Country  Suite, Apt. # etc.  Trust Find Contribution  Country  Suite, Apt. # etc.  Fee Required  Found Contribution  Discreptable and Address of New Registered Agent  Name  Country  Suite, Apt. # etc.  Fee Required  Fe
Suite, Apt. #, etc.    Cocala
City & State  City & State  City & State  28 34472  Country  Zip  Country  29 30  Solution Campaign Financing Trust Fund Contribution  Added to Fees  Trust Fund Contribution  8. This corporation has flability for intangible tax under s. 199.032, Florida Statutes  Yes  No  9. Name and Address of Current Registered Agent  OCASIO, JUAN 83 TEAK LOOP OCALA FL 32672  81 Name  City & State  City & State  Country  8. This corporation has flability for intangible tax under s. 199.032, Florida Statutes  Yes  No  81 Name Cibert  Country  82 Street Address (P.O. Box Number is Not Acceptable)  83 OCALA  84 City  FL 85 Zip Code 72
Trust Fund Contribution Added to Fees  Zip Country Zip Country 8. This corporation has flability for intangible tax under s. 199.032, Florida Statutes Yes No  9. Name and Address of Current Registered Agent  OCASIO, JUAN 83 TEAK LOOP OCALA FL 32672  Trust Fund Contribution Added to Fees  8. This corporation has flability for intangible tax under s. 199.032, Florida Statutes Yes No  10. Name and Address of New Registered Agent  81 Name Ci Der Country  82 Street Address (P.O. Box Number is Not Acceptable)  83 OCALA FL 32672  84 City FL 85 Zip Code 72
Zip Country Zip Country B. This corporation has fiability for intangible tax under s. 199.032, Florida Statutes Yes No  9. Name and Address of Current Registered Agent  OCASIO, JUAN 83 TEAK LOOP OCALA FL 32872  81 Name Ci Dert Bour Address of New Registered Agent  82 Streat Address (P.O. Box Number is Not Acceptable) Box 70 25 4#1 Henlock Terms (ox 84 City FL 85 344772
9. Name and Address of Current Registered Agent  OCASIO, JUAN 83 TEAK LOOP OCALA FL 32872  29 30 Florida Statutes  10. Name and Address of New Registered Agent  81 Name 61 Der + Book Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Ocala 84 City  FL 85 Zip Code 84 City
9. Name and Address of Current Registered Agent  OCASIO, JUAN  82 Streat Address (P.O. Box Number is Not Acceptable).  OCALA FL 32872  83 Ocala.  84 City  FL 85 Zip Code 72
OCASIO, JUAN 83 TEAK LOOP OCALA FL 32872  81 Name Gibert Bonilo 82 Street Address (P.O. Box Number is Not Acceptable) 83 Ocala 84 City  FL 85 Zip Code 84 Y 72
OCASIO, JUAN 83 TEAK LOOP OCALA FL 32872  82 Street Address (P.O. Box Number is Not Acceptable) 83 OCALA City  FL 85 Zip Code 34 City
83 TEAK LOOP OCALA FL 32872  83 Ocala City  FL 85 Zip Cod972
OCALA FL 32672  83
Ocala,  84 City  FL 85 Zip Code 72 344772
FL 34972
THE PURSUADI DETINE DIDVISIONS DESECUDAS DEL USUZ AUD DEL EDUCA FIORICA SIABILES. DE XDOVE-DAMBO COMOCRATION SUBMINISTRIS SERIEMENTACIONES DE SECUDAS DE CORDONOS
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, typed or printed arms of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating)
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD Change Addition
TITLE NAME OCASIO, JUAN STREET ADDRESS 83 TEAK LOOP  DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS #1 Hemlock Terrace Court
STREET ADDRESS 83 TEAK LOOP 1.3 STREET ADDRESS #1 Hemlock lerrace Court
CITY-ST-ZIP OCALA FL 13 STREET ADDRESS OCALA, FLOCI da 34472
TITLE TD DELETE 2.1 TITLE Change Addition
NAME COLON, ANIBAL 22 NAME
STREET ADDRESS 48 TEAK LOOP 23 STREET ADDRESS
CITY-ST-ZIP OCALA FL 2.4 CITY-ST-ZIP
TITLE \$D DELETE 3.1 TITLE Change Addition
NAME O'NEILL, MARISOL 32 NAME
STREET ADDRESS 3 HEMLOCK LOOP TRAIL 3.3 STREET ADDRESS
CITY-ST-ZIP OCALA FL 3.4. CITY-ST-ZIP
TITLE DELETE 4.1 TITLE Change Addition
NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE DELETE 5.1 TITLE Change Addition
NAME 5.2 NAME
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NAME 6.2 NAME
STREET ADDRESS 6.3 STREET ADDRESS
City-St-ZiP 6.4 City-St-ZiP 6.4 City-St-ZiP 6.4 City-St-ZiP 1.4 Lide hereby certify that the information supplied with this filling does not qualify for the eventure stated in Section 119 07/3/(i). Floride Statutes I further certify that the
14. I do 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; the 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.