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Jan 31 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N25956 (6)

1. Corporation Name

THE BIBLE WAY SOUL SAVING STATION INC.

Principal Place of Business

464 N 9TH ST  
FT PIERCE FL 34950  
US

Mailing Address

P O BOX 311  
FT PIERCE FL 34954-0311  
US

3. Date Incorporated or Qualified  
04/18/1988

3a. Date of Last Report  
01/25/1996

2. Principal Place of Business

21 464 N. 9th Street

Suite, Apt. #, etc.

22

City & State

23 FORT PIERCE

Zip

24 34950

Country

25 US

26. Mailing Address

26 PO Box 311

Suite, Apt. #, etc.

27

City & State

28 FORT PIERCE

Zip

29 34954

Country

30 USA

4. FEI Number

59-2749070

Applied For

Not Applicable

5. Certificate of Status Desired

8

\$8.75 Additional

Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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

MILLS, KENNETH  
603 SOUTH 22ND ST.  
FT. PIERCE FL 34950

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 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

Kenneth Mills

Kenneth Mills

1-21-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME MILLS, KENNETH  
STREET ADDRESS 603 S. 22ND STREET  
CITY-ST-ZIP FT. PIERCE FL

TITLE VD ☐ DELETE

NAME MILLER, PINKIE  
STREET ADDRESS 5303 SANDIEGO AVE.  
CITY-ST-ZIP FT. PIERCE FL

TITLE STD ☐ DELETE

NAME MILLS, DONNA  
STREET ADDRESS 603 S. 22ND STREET  
CITY-ST-ZIP FT. PIERCE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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; 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:

Kenneth Mills - 01/24/97 (561) 466-7847

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0071078

CR2E037 (9/96)