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May 05 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 # N32135 (8)

1. Corporation Name

KEVIN SHOREY MINISTRIES, INC.



Principal Place of Business

Mailing Address

4779 CONCORDIA LANE
BOYNTON BEACH FL 33436
US

P.O. BOX 3329
BOYNTON BEACH FL 33424-3329
US

3. Date Incorporated or Qualified
05/05/1989

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21. ~~Delete P.O. Box 2252~~

26. ~~DELETE P.O. Box 2252~~

22. ~~from the above address~~

27. ~~from the above address~~

23. ~~All else is correct~~

28. ~~All else is correct~~

24. ~~Zip~~

29. ~~Zip~~

25. ~~Country~~

30. ~~Country~~

4. FEI Number
65-0119821

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

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

SHOREY, KEVIN
4779 CONCORDIA LANE
BOYNTON BEACH FL 33436

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

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 ☐ DELETE

NAME PD
SHOREY, KEVIN
STREET ADDRESS 4779 CONCORDIA LANE
CITY-ST-ZIP BOYNTON BEACH FL 33436

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

4779 CONCORDIA LANE
BOYNTON BEACH, FL 33436

TITLE ☐ DELETE

NAME VD
RAY, HAROLD
STREET ADDRESS 4830 DORCHESTER MEWS
CITY-ST-ZIP WEST PALM BEACH FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME STD
KENDRICK, CHRISTINE
STREET ADDRESS 4779 CONCORDIA LANE
CITY-ST-ZIP BOYNTON BEACH FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

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 KEVIN SHOREY 4-18-97 (FL) 75-4495

CR2E037 (9/96)