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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # N32318 (0)

1. Corporation Name

FLORIDA MINISTER'S ASSOCIATION INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -3 PM 1:42

Principal Place of Business

Mailing Address

1211 SOUTHERN ST.
TALLAHASSEE FL 32310

P.O. BOX 61
WOODVILLE FL 32362

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1989

3a. Date of Last Report

01/21/1994

4. FEI Number

65-0142138

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

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

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLF, RICHARD E. REV
1211 SOUTHERN STREET
TALLAHASSEE FL 32310

81 Name

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

1209 SOUTHERN STREET

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 REV. RICHARD E. WOLF (SAME)

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

WOLF, RICHARD E.

STREET ADDRESS

1211 SOUTHERN STREET

CITY - ST - ZIP

TALLAHASSEE FL 32310

TITLE

SD

NAME

WOLF, MELODY DAWN

STREET ADDRESS

1211 SOUTHERN STREET

CITY - ST - ZIP

TALLAHASSEE FL 32310

TITLE

TD

NAME

HARRISON, DEBORAH

STREET ADDRESS

4615 DELEON ST G#147

CITY - ST - ZIP

FORT MYERS FL 33907

TITLE

MD

NAME

HARRISON, MARK

STREET ADDRESS

4615 DELEON STREET

CITY - ST - ZIP

FORT MYERS FL 33907

TITLE

D

NAME

HINES, PATRICA

STREET ADDRESS

4216 PINE DROP LANE

CITY - ST - ZIP

N. FORT MYERS FL

TITLE

VD

NAME

DOYLE, DOUGLAS

STREET ADDRESS

1209 SOUTHERN STREET

CITY - ST - ZIP

TALLAHASSEE FL 32310

1.1 TITLE

P C

1.2 NAME

WOLF, RICHARD E.

1.3 STREET ADDRESS

1209 SOUTHERN STREET

1.4 CITY - ST - ZIP

TALLAHASSEE, FL. 32310

2.1 TITLE

S D

2.2 NAME

WOLF, MELODY DAWN

2.3 STREET ADDRESS

1209 SOUTHERN STREET

2.4 CITY - ST - ZIP

TALLAHASSEE, FL. 32310

3.1 TITLE

T D

3.2 NAME

HARRISON, DEBORAH

3.3 STREET ADDRESS

5249-20 RED CEDAR DRIVE

3.4 CITY - ST - ZIP

FORT MYERS, FL. 33907

4.1 TITLE

V D

4.2 NAME

HARRISON, MARK

4.3 STREET ADDRESS

5249-20 RED CEDAR DRIVE

4.4 CITY - ST - ZIP

FORT MYERS, FL. 33907

5.1 TITLE

D

5.2 NAME

SMITH, KAREN

5.3 STREET ADDRESS

1211 SOUTHERN STREET

5.4 CITY - ST - ZIP

TALLAHASSEE, FL. 32310

6.1 TITLE

V D

6.2 NAME

DOYLE, DOUGLAS

6.3 STREET ADDRESS

1211 SOUTHERN STREET

6.4 CITY - ST - ZIP

TALLAHASSEE, FL. 32310

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the safe harbor provision of Section 1103.03(4), Florida Statutes. I further certify that the information included 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Melody Dawn Wolf
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/95

933-6387