6-25-97 B-7906 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT COMPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED

Jun 25 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N32326

(3)

EASTMAN CURTIS MINISTRIES, INC.

EASTMAN CONTIS MINISTRIES, INC.											
Principal Plac	e of Business	Mailing Address								19811 87811 1881	
5115 SOUTH 122ND EAST AVENUE SUITE 202 TULSA OK 74146		P O BOX 470290 TULSA OK 74147-0290 US									
US						05/1	porated or Qualified 8/1989	3a. Date o	of Last Re 2/26/19		
2. Principal P	lace of Business	28. Mailing Address				4. FEI Number Applied For 91-1348113 Not Applicable					
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required					
City & State	ө	City & State					impaign Financing Contribution		\$5.00 Added t		
Zip	Country	Zip	Coun	try		•	ration has liability for i			199.032,	
24			30			Florida Statutes Yes No 10. Name and Address of New Registered Agent					
9. Name and Address of Current Registered Agent				1 Name		U. Name and	Address of New Her	jisterea Age	nt		
CHIPTIE	, EASTMAN					/D.O. D					
	AID MARION TRAIL					(P.O. Box Nur	mber is Not Acceptab			 	
LAKELA	ND FL 33809		Į.	3							
			[6	4 City	-			FL	5 Zip (Code	
	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	and 617,1508, Florida Stat of Florida. Such change was tions of, Section 617,0503, I	utes, the abo authorized Torida Statu	ove-named by the cor es	d corpora rporation'	tion submits the board of dire	his statement for the pectors. I hereby accep	urpose of chart the appoint	anging it ment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered agen	t and title it applicable. (N	OTE: Registered	ant signature	w beriuper e	hen reinstating)		DATE			
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS,	CHANGES TO OFFIC	ERS AND DI	RECTOR	IS IN 12	
TITLE	D	DELETE	1.1 Titt					×	Change	☐ Addition	
NAME	CURTIS, EASTMAN		1.2 NAM	E)						
STREET ADDRESS	8311 MAID MARION TRAIL		1.3 STR	ET ADDRESS	1170	5 8. bb	TH E. AVE.				
CITY-ST-ZIP	<u>L</u> AKELAND FL		1.4 CITY	-ST-2(P	BIX	BY. OK	74008				
TITLE	D	DELETE	2.1 TITL					Z	Change	Addition	
NAME	CURTIS, ANGEL		2.2 NAN	E] .		THE AUE	:			
STREET ADDRESS	8311 MAID MARION TRAIL		2.3 STR	ET ADDRESS			TH E. AVE	•			
CITY-ST-ZIP	LAKELAND FL		2 4 CiT	-ST-ZIP	BIX	by, of	74008				
TITLE	D	DELETE	3 1 THTL	F					Change	Addition	
NAME	SCARBOROUGH. REGINALD		3.2 NAN	E							
STREET ADDRESS	1350 E. MAIN STREET		3.3 \$TR	ET ADDRESS							
CITY-ST-ZIP	LAKELAND FL		3.4. CIT	-ST-ZIP		·					
TITLE	P	☐ DELETE	4.1 TITL		ŀ				Change	Addition	
NAME	mike James 8937 S Hudson Au	10	4. 2 NAI	1E							
STREET ADDRESS	8937 3 Huason 140	· K _	4.3 STR	ET ADDRESS						-	
CITY-ST-ZIP	TWSa,OK7413"	7		- ST- ZIP	 						
TITLE		DELETE	5.1 TITL					Ц	Change	Addition	
NAME			5.2 NAM		1					İ	
STREET ADDRESS				ET ADDRESS	1						
CITY-ST-ZIP				-ST-ZIP	 						
TITLE		DELETE	6.1 TITL					L	Change	Addition	
NAME			6.2 NAN								
STREET ADDRESS			6.3 STR	ET ADDRESS	1						

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 to supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that it 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 a pattact and with an address.