

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Martham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N39743

(2)

1. Corporation Name

MANNA MINISTRY, INC.

Principal Place of Business

3315 NE 27TH TERRACE
LIGHTHOUSE POINT FL 33064-8501

Mailing Address

3315 NE 27TH TERRACE
LIGHTHOUSE POINT FL 33064-8501

2. Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

LACHO, LUBOMIR D
3315 NE 27 TERR.
LIGHTHOUSE POINT FL 33064

3. Date Incorporated or Qualified
08/27/1990

3a. Date of Last Report
01/27/1995

4. FEI Number
65-0217506

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

10. Name and Address of New Registered Agent

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	PVD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LACHO, DR. LUBOMIR		1.2 NAME	
STREET ADDRESS	3315 NE 27TH TERRACE		1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REZNIK, MARTIN I.		2.2 NAME	
STREET ADDRESS	4959 N. STATE ROAD 7 #B		2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL		2.4 CITY-ST-ZIP	
TITLE	STD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LACHO, MARIA		3.2 NAME	
STREET ADDRESS	3315 NE 27TH TERRACE		3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL		3.4 CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHRAKE, KARLA		4.2 NAME	
STREET ADDRESS	801 SE 12TH STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL		4.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/17/96

954-784-0074

Date

Daytime Phone #

CR2E037 (12/95)

03/17/96
954-784-0074
3-29-1996