

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N40001 (2)
1. Corporation Name
DOUBLE VISION MINISTRIES, INC.

Principal Place of Business

2061 MCGREGOR BLVD
FT MYERS FL 33901

Mailing Address

2061 MCGREGOR BLVD
FT MYERS FL 33901



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 11651 E. TERRY ST.		26 11651 E. TERRY ST.		09/18/1990		02/20/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		85-0582837		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 BONITA SPRINGS, FL		28 BONITA SPRINGS, FL		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added To Fees	
Zip		Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
24 33923		29 33923		30			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
METZGER, JEFFREY FIRST CHRISTIAN CHURCH 2061 MCGREGOR BLVD FT MYERS FL 33901				81 Name CAMERON MASON 82 Street Address (P.O. Box Number is Not Acceptable) 11651 E. TERRY ST 83 ANCHOR CHRISTIAN CHURCH 84 City BONITA SPRINGS FL 85 Zip Code 33923			

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 *Cameron Mason*

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

(NOTE: Registered Agent signature required when reinstating)

CAMERON MASON 6/11/96

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	T
NAME	AHLGRIM, ALAN	1.2 NAME	CAMERON MASON
STREET ADDRESS	9447 NIWOT RD.	1.3 STREET ADDRESS	11651 E. TERRY ST.
CITY-ST-ZIP	LONGMONT CO	1.4 CITY-ST-ZIP	BONITA SPRINGS
TITLE	D	2.1 TITLE	V
NAME	SCHNEIDERS, GLEN	2.2 NAME	STEVE HOLSINGER
STREET ADDRESS	3712 ARBOR COURT	2.3 STREET ADDRESS	7801 E. 32ND AVE
CITY-ST-ZIP	LEXINGTON KY	2.4 CITY-ST-ZIP	ANCHORAGE, ALASKA 99504
TITLE	D	3.1 TITLE	
NAME	SLONIGER, ROBERT	3.2 NAME	191E STEGER RD
STREET ADDRESS	191 E STEGER RD	3.3 STREET ADDRESS	CHICAGO HEIGHTS, IL
CITY-ST-ZIP	CHICAGO HEIGHTS IL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	P
NAME	METZGER, JEFFREY	4.2 NAME	JEFF METZGER
STREET ADDRESS	2061 MCGREGOR BLVD	4.3 STREET ADDRESS	525 SHANPIKE RD.
CITY-ST-ZIP	FT MYERS FL	4.4 CITY-ST-ZIP	CHATHAM, N.J. 07928
TITLE	CD	5.1 TITLE	
NAME	WASEM, JOHN	5.2 NAME	
STREET ADDRESS	P.O. BOX 456 N/A	5.3 STREET ADDRESS	400001891674
CITY-ST-ZIP	ST. JOHN IN	5.4 CITY-ST-ZIP	-07/12/96--01004--057
TITLE	D	6.1 TITLE	
NAME	WILLIAMS, PAUL	6.2 NAME	***61.25
STREET ADDRESS	40 MARILYN ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	EAST ISLIP NY	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

CAMERON MASON

Date

Daytime Phone #

02E037 (3/96)