

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # N41436 (9)**

1. Corporation Name

**JOY MINISTRIES, INC.**



Principal Place of Business

**131 SOUTH EIGHTH AVENUE  
WAUCHULA FL 33873  
US**

Mailing Address

**EULA TOOTSIE GUDAL  
1380 MT. PISGAH ROAD  
FT. MEADE FL 33841  
US**

3. Date Incorporated or Qualified  
**12/21/1990**

3a. Date of Last Report  
**03/10/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GUDAL, EULA TOOTSIE  
1380 MT PISGAH RD  
FT MEADE FL 33841**

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 **Eula "Tootsie" Gudal**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

*Eula "Tootsie" Gudal*

**4/8/96**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	<b>GUDAL, EULA TOOTSIE</b>	
STREET ADDRESS	<b>1380 MT PISGAH RD</b>	
CITY-ST-ZIP	<b>FT MEADE FL 33841</b>	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	<b>BECKHAM, JANET</b>	
STREET ADDRESS	<b>P O BOX 87 N/A</b>	
CITY-ST-ZIP	<b>ZOLFO SPRINGS FL 33890</b>	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	<b>GUDAL, LARS C</b>	
STREET ADDRESS	<b>1380 MT PISGAH RD.</b>	
CITY-ST-ZIP	<b>FT. MEADE FL 33841</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>GILLIARD, RONALD</b>	
STREET ADDRESS	<b>PO BOX 806 N/A</b>	
CITY-ST-ZIP	<b>ZOLFO SPRINGS FL</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>COLE, ED</b>	
STREET ADDRESS	<b>RT 1 BOX 273R</b>	
CITY-ST-ZIP	<b>WAUCHULA FL 33873</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>BIGGERS, JOY</b>	
STREET ADDRESS	<b>3625 JACQUE LEE LANE</b>	
CITY-ST-ZIP	<b>LAKELAND FL 33801</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: *Janet R. Beckham*

**4/08/96**

**941-767-0870**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Janet R. Beckham, Secretary/Treasurer/Director**

Daytime Phone #

CR2E037 (12/95)