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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	E DIVISION C	OF CORPORATIONS	i			
DOCU 1. Corporatio	MENT # N414	36 (9)					
·	IINISTRIES, INC.						
				1 1861(18) 211	1400 HAD 11410 HAD	ing bibir baba baba bibi	ENGLI ANNO GREG
Principal Place	e of Business	Mailing Address					
•	EIGHTH AVENUE	C	L i				
WAUCHULA		EULA TOOTSIE GUD/ 1380 MT. PISGAH RO					
00		FT. MEADE FL 33841 US		3. Date Incorpora		3a. Date of Last	
D. Deineinel D				12/21/1	990	03/10/1	995
2. Filificipal P	lace of Business	2a. Mailing Address		4. FEI Number 65-023 (1728	<u> </u>	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Not Applicable Additional
2		27		5. Certificate of S	Status Desired		Required
City & Stat	e	Crty & State		6. Election Camp		\$5.0	O May Be
Zip	Country	Zip	Country	Trust Fund Co			d to Fees
4]	25	29	30	8. This corporation Florida Statute		tangible tax under s. Yes 🏿 🛣 No	199.032,
	9. Name and Address of Curre		1991		ddress of New Re		
			81 Nar	ne			
	EULA TOOTSIE		82 Stre	eet Address (P.O. Box Numbe	r is Not Acceptable)	
	「PISGAH RD De Fl. 33841		83				···
FI MEA	DE PL 33841		83				
			84 City			FL 85 Zip	p Code
			1 1				
Pursuant	to the provisions of Sections 617.050	02 and 617,1508, Florida Statu	ites, the above named	corporation submits this stat	ement for the numor	ase of changing its r	enistered office
				corporation submits this states to board of directors. I hereb	ement for the purpo y accept the appoir	ose of changing its r ntment as registered	egistered office agent. I am
familiar wi	th, and accept the obligations of, Se	ction 617.0503, Florida Statute		I corporation submits this stat n's board of directors. I hereb	ement for the purpor y accept the appoir	ose of changing its ratment as registered	egistered office agent. I am
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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.

GNATURE:

4/08/96

941-767-0870

Dayline Phone #

Dayline Phone #

Dayline Phone #

SIGNATURE: