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FILED

May 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N41436** (9)

1. Corporation Name

**JOY MINISTRIES, INC.**

Principal Place of Business

Mailing Address

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

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



3. Date Incorporated or Qualified

**12/21/1990**

4. FEI Number

**65-0230728**

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**

7. Is this nonprofit corporation a homeowners' association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip Country **28** Zip Country

**24** Zip Country **25** Zip Country **29** Zip Country **30** Zip Country

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*

(NOTE: Registered Agent signature required when reinstating)

DATE

**5/4/98**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE  
NAME **GUDAL, EULA TOOTSIE**  
STREET ADDRESS **1380 MT PISGAH RD**  
CITY-ST-ZIP **FT MEADE FL 33841**

1.1 TITLE **Director** ☐ Change ☒ Addition  
1.2 NAME **Steven Ybarra**  
1.3 STREET ADDRESS **223 NE Riverside Drive**  
1.4 CITY-ST-ZIP **Wauchula, FL 33873** ☐ Change ☒ Addition

TITLE **STD** ☐ DELETE  
NAME **BECKHAM, JANET**  
STREET ADDRESS **P O BOX 87 N/A 1543 STENSTROM Road**  
CITY-ST-ZIP **ZOLFO SPRINGS FL 33890 Wauchula, FL 33873**

2.1 TITLE **Director** ☐ Change ☒ Addition  
2.2 NAME **Al Farrell**  
2.3 STREET ADDRESS **22 S. Cherokee Avenue**  
2.4 CITY-ST-ZIP **Ft. Meade, FL 33841** ☐ Change ☐ Addition

TITLE **VD** ☐ DELETE  
NAME **GUDAL, LARS C**  
STREET ADDRESS **1380 MT PISGAH RD.**  
CITY-ST-ZIP **FT. MEADE FL 33841**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME ☐ Change ☐ Addition  
3.3 STREET ADDRESS ☐ Change ☐ Addition  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ DELETE  
NAME **GILLIARD, RONALD**  
STREET ADDRESS **PO BOX 808 N/A**  
CITY-ST-ZIP **ZOLFO SPRINGS FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME ☐ Change ☐ Addition  
4.3 STREET ADDRESS ☐ Change ☐ Addition  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ DELETE  
NAME **COLE, ED**  
STREET ADDRESS **RT 1 BOX 273R**  
CITY-ST-ZIP **WAUCHULA FL 33873**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME ☐ Change ☐ Addition  
5.3 STREET ADDRESS ☐ Change ☐ Addition  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ DELETE  
NAME **BIGGERS, JOY**  
STREET ADDRESS **3625 JACQUE LEE LANE**  
CITY-ST-ZIP **LAKELAND FL 33801**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME ☐ Change ☐ Addition  
6.3 STREET ADDRESS ☐ Change ☐ Addition  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I 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 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 P. Beckham Janet P. Beckham Sec. Treas. 5/4/98 941-767-0870*

CR2E037 (10/97)