

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N45252

(6)

1. Corporation Name

DENNIS MINISTRIES, INC.



Principal Place of Business

2731 SW 89TH PLACE
OCALA FL 34476
US

Mailing Address

2731 SW 89TH PLACE
OCALA FL 34476
US

3. Date Incorporated or Qualified
09/20/1991

3a. Date of Last Report
04/06/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-3087775

Applied For
Not Applicable

5. Certificate of Status Desired

XX

\$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

XX No

9. Name and Address of Current Registered Agent

DENNIS, GERALD J.
2731 SW 89TH PLACE
OCALA FL 34476

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.

April 15, 1996

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	□ DELETE
NAME	DENNIS, GERALD J.	
STREET ADDRESS	2731 SW 89TH PLACE	
CITY-ST-ZIP	OCALA FL	
TITLE	D	□ DELETE
NAME	DENNIS, ESMERALDA J.	
STREET ADDRESS	2731 SW 89TH PLACE	
CITY-ST-ZIP	OCALA FL	
TITLE	D	□ DELETE
NAME	SHUTE, ELDEN H, JR.	
STREET ADDRESS	8880-A S.W. 94TH STREET	
CITY-ST-ZIP	OCALA FL	
TITLE	D	□ DELETE
NAME	MACLEOD, MALCOLM	
STREET ADDRESS	3382 NW 44TH TERR	
CITY-ST-ZIP	OCALA FL	
TITLE	D	□ DELETE
NAME	TORTORISE, CHARLES	
STREET ADDRESS	1526 39TH RD	
CITY-ST-ZIP	VERO BCH FL	
TITLE		□ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

1.1 TITLE	□ Change	□ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	□ Change	□ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	□ Change	□ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	□ Change	□ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	□ Change	□ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	□ Change	□ 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:

Gerald J. Dennis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. Gerald J. Dennis

4/15/96 (352) 237-0452

DAY

DAYTIME PHONE #

CR2E037 (12/95)