FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

1998
DOCUMENT #

N45762

(4)

WARD WEAVER MINISTRIES, INC.

FILED
Jan 22 1998 8:00am
Secretary of State

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Principal Place of Business Mailing Address		F CONTINUE BY DISCUSSION FOR A STATE OF THE CITE OF STATE CONTINUES OF STATE OF STAT			
2701 WATERS AVENUE WEST APT 706 TAMPA FL 33614	2701 WATERS AVENUE WEST APT 706 TAMPA FL 33614		3. Date Incorporated or Qualified 10/24/1991		
TAMEN I L BOOT			4. FEI Number Applied For		
			59-3110701 Not Applicable		
2. Principal Place of Business 21	2a. Mailing Address		Certificate of Status Desired \$8.75 Additional Fee Required		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campalgn Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State City & State 23 28			7. Is this nonprofit corporation a homeowners association? Yes No		
Zip Country 25	29 30	untry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
TANKA A MININA A		81 Name	•		
WEAVER, WARD A 2701 WATERS AVENUE WEST		Street Address (P.O. Box Number is Not Acceptable)			
APT 706		83			
TAMPA FL 33614		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.

agent. i a	m familiar with, and accept the obligations of	f, Section 617.0503, Fk	orida Statutes.			J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
SIGNATURE .	Other transfer of the state of	Non-Verbia	E. Statistical Association	DATE:		
12.				required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	DELETE	13. 1.1 TITLE		Change	∡ Addition
NAME	WEAVER, WARD A		1.2 NAME			
STREET ADDRESS	2701 WATERS AVENUE WEST		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP	33614-1870		
ππle	VD	☐ DELETE	2.1 TITLE		☐ Change	≇ Addition
NAME	MARTIN, JAMES R		2.2 NAME			
STREET ADDRESS	7530 RED OAK LANE		2.3 STREET ADDRESS			
CITY-ST-ZIP	CHARLOTTE N.		2. 4 CITY-ST-ZIP	N.C. 28226		
TITLE	SD	☐ DELETE	3.1 TITLE		Change	✓ Addition
NAME	ROBBINS, NATALIE J		3.2 NAME			
STREET ADDRESS	1504 LAJOLLA AVE		3.3 STREET ADDRESS			
CITY-ST-ZIP	SUN CITY CENTER FL		3.4. CITY-ST-ZIP	33573		
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	•		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP		·	
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY_ST_7IP			6.4 CITY - ST-7IP			

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:

Fand ICL! CriminE WARD A WEAVER

1/1/98 1-813-935-0907

CR2E037 (10/97)