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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name N 47235 (9) ART YOHNER MISSIONS MINISTRIES, INC.			
Principal Place of Business 216 - 41st STREET WEST BRADENTON, FL 34209-2940 US		Mailing Address P.O. BOX 1122 BRADENTON, FL 34206-1122 US	
2. Principal Place of Business 21 Suite Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite Apt. #, etc. 27 City & State 28 Zip Country	
3. Date Incorporated or Qualified 02/10/1992		3a. Date of Last Report 01/31/1996	
4. FEI Number 65-03 16978		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent YOHNER, ARTHUR W. 216 41ST STREET WEST PO BOX 1122 BRADENTON, FL 34206-1122		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.			
SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____			
12. OFFICERS AND DIRECTORS			
1.1 TITLE <input type="checkbox"/> DELETE 1.2 NAME BELL, HARRY 1.3 STREET ADDRESS 6704 7TH AVENUE DR NW 1.4 CITY-ST-ZIP BRADENTON, FL 34209			
2.1 TITLE <input type="checkbox"/> DELETE 2.2 NAME HUTH, JOHN 2.3 STREET ADDRESS 7019 18TH AVE DR NW 2.4 CITY-ST-ZIP BRADENTON, FL			
3.1 TITLE <input checked="" type="checkbox"/> DELETE 3.2 NAME LYTLE, ROY 3.3 STREET ADDRESS 3403 33RD ST CT W 3.4 CITY-ST-ZIP BRADENTON, FL			
4.1 TITLE <input type="checkbox"/> DELETE 4.2 NAME YOHNER, ARTHUR W 4.3 STREET ADDRESS 216 41ST STREET WEST 4.4 CITY-ST-ZIP BRADENTON, FL 34209			
5.1 TITLE <input type="checkbox"/> DELETE 5.2 NAME YOHNER, EVELYN B 5.3 STREET ADDRESS 216 41ST STREET WEST 5.4 CITY-ST-ZIP BRADENTON, FL 34209			
6.1 TITLE <input type="checkbox"/> DELETE 6.2 NAME WITT, RON 6.3 STREET ADDRESS 704 23RD AVE. W. 6.4 CITY-ST-ZIP PALMETTO, FL 34221			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 34209 2.1 TITLE <input type="checkbox"/> Change <input checked="" 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 checked="" type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 34209 5.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 34209 6.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 34221			
14. I do 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Art Yohner - PRESIDENT		04-14-97 (941) 747-5625 Date Daytime Phone #	

CR2E037 (9/96)

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addendum

FLORIDA DEPARTMENT OF STATE
NON PROFIT CORPORATION ANNUAL REPORT 1997
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ADDITIONS

7.1 TITLE	-	D
7.2 NAME	-	CHAPPELL, RON
7.3 ADDRESS	-	6526 TANAGER ST
7.4 CITY - ST - ZIP	-	SARASOTA, FL 34241

8.1 TITLE	-	D
8.2 NAME	-	JOHNSON, JOHN
8.3 ADDRESS	-	803 MANATEE AVE W
8.4 CITY - ST - ZIP	-	BRADENTON, FL 34205