FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED Jan 30 1998 8:00am Secretary of State

1. Corporation Name N4/235 (9)													
ART YOHNER MISSIONS MINISTRIES, INC.													
ATT TOTALE MICCIONG MANGTHES, INC.										ili Rigir Broke grdi)		BIR TURN JERN	
Principal Place of Business				Mailing Address					A TORLISMS HET MINIT TENIN EITEN EELIN M	191 MENEL MINIS MINIS		B) 4101 108;	
216 - 41ST ST	REET WEST		P	P. O. BOX 1122					3. Date Incorporated or Qualified		_ _		
BRADENTON FL 34209-2940				BRADENTON FL 34206-1122					02/10/1992				
US				US					4. FEI Number		ΙΔr	plied For	
									65-0316978			t Applicable	
2. Principal Place of Business				2a. Mailing Address						3 \$8.		Additional	
21				26					5. Certificate of Status Desired			guired	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					6. Election Campaign Financing			Лау Ве	
22				27					Trust Fund Contribution	L Ado	ded to	Fees	
City & State				City & State					7. Is this nonprofit corporation a homeowners association?				
ZIp Country				Zip Country				Yes X No 8. This corporation owes or has paid the current year Intangible					
24	25			29 30			,		Personal Property Tax due June 3			angible I No	
		and Address of Curre							10. Name and Address of New Reg			4 · · · ·	
							Name						
YOHNER, ARTHUR W						82	Street 4	Addres	ss (P.O. Box Number is Not Acceptable	<u></u>			
216 41ST STREET WEST							0	100,00	oo (i .o. box ramber to riot redeptable				
PO BOX 1122						83	3						
BRADENTON FL 34206-1122						84	City	-		85	Zip (Inde	
						1					•		
11. Pursuant office or r	ons of Sections 617.05 ent. or both, in the Stati	02 and (e of Flor	617.1508, F ida, Such d	Florida Statu change was	tes, the above authorized b	e-named o	corpor	ration submits this statement for the pu n's board of directors. I hereby accept	rpose of chang	ing its	registered		
agent. I a	m tamillar wit	h, and accept the obliq	gations o	of, Section (617.0503, FI	orida Statute	s.		, , , , , , , , , , , , , , , , , , , ,			09.0.0.00	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
12.	OFFICERS AND DIRECTORS						erit signature i	required	ADDITIONS/CHANGES TO OFFICE		TOR	S IN 12	
TITLE	D			☐ DELETE			13. 1.1 TITLE			☐ Ch:		Addition	
NAME	BELL, HARRY						1.2 NAME						
STREET ADDRESS	6704 7TH AVENUE DR. NW			1			T ADDRESS						
CITY-ST-ZIP	BRADENTON FL 34209						1,4 CITY-ST-ZIP						
TITLE	D			☐ DELETE			2.1 TITLE			☐ Chi	inge	Addition	
NAME	HUTH, JOHN						2.2 NAME						
STREET ADDRESS	7019 18TH AVE DR NW						2.3 STREET ADDRESS						
CITY - ST - ZIP	BRADENTON FL 34209			I DELETE			2. 4 CITY-ST-ZIP					1 1 4 1 1911	
TITLE	PD ADTUUD IA			☐ DELETE			3.1 TITLE			L_ Cha	inge	☐ Addition	
NAME	YOHNER, ARTHUR W 216 41ST STREET WEST						3.2 NAME 3.3 STREET ADDRESS						
STREET ADDRESS	BRADENTON FL 34209												
CITY - ST - ZIP TITLE	TD	TON FL 34209		Г	DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP			Cha	nne	Addition	
NAME		, EVELYN B		_		4. 2 NAME					.rege		
STREET ADDRESS		T STREET WEST				E .	T ADDRESS						
CITY-ST-ZIP		TON FL 34209				4.4 CITY-S	1						
TITLE	CD				DELETE	5.1 TITLE				Cha	ınge	Addition	
NAME	WITT, RO	N				5.2 NAME				_	-		
STREET ADDRESS		D AVENUE W.				5.3 STREET	ADDRESS						
CITY - ST - ZIP	PALMET	TO FL 34221				5.4 CITY - S	ST-ZIP						
TITLE	F		_		DELETE	6.1 TITLE				Cha	nge	☐ Addition	
NAME	CHAPPE	•				6.2 NAME						İ	
STREET ADDRESS		NAGER ST				6.3 STREET	ADDRESS						
CITY-ST-ZIP		TA FL 34241				6.4 CITY - S			- No. 440 07(0)(i) Firster Charles Life		·		

indicated on this annual report or supplied with this litting does not quality 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 op an attachment with an address.

(941) 147-5625