

FILE NOW: FILING FEE IS \$61.25

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Apr 08 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N48344** (8)

1. Corporation Name

**JON EARGLE MINISTRIES, INC.**



Principal Place of Business	Mailing Address
<b>75 FAIRGLEN TITUSVILLE FL 32786 US</b>	<b>P.O. BOX 2546 TITUSVILLE FL 32781-2546</b>

3. Date Incorporated or Qualified <b>04/13/1992</b>	3a. Date of Last Report <b>05/01/1996</b>
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2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>73-1088575</b>	Applied For <input type="checkbox"/> Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
23 Zip	28 Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24 Country	29 Country		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EARGLE, CATHIE A.  
6375 WINDOVER WAY  
TITUSVILLE FL 32780**

81 Name	<b>EARGLE, CATHIE A.</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>75 FAIRGLEN DR.</b>
83	
84 City	<b>TITUSVILLE</b>
85 Zip Code	<b>FL 32796</b>

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 *Cathie A. Eargle* (NOTE: Registered Agent signature required when reinstating) DATE **4-1-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PT</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>EARGLE, JON H</b>	1.2 NAME	
STREET ADDRESS	<b>75 FAIR GLEN</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TITUSVILLE FL</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VT</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GIBSON, FREDIE H</b>	2.2 NAME	<b>GIBSON, FREDDIE H</b>
STREET ADDRESS	<b>2227 E 22ND PL</b>	2.3 STREET ADDRESS	<b>8008 S. ERIE</b>
CITY-ST-ZIP	<b>TULSA OK</b>	2.4 CITY-ST-ZIP	<b>TULSA, OK 74136</b>
TITLE	<b>ST</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>EARGLE, CATHIE A</b>	3.2 NAME	
STREET ADDRESS	<b>75 FAIR GLEN</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TITUSVILLE FL</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 *Cathie A. Eargle* DATE **4-1-97**

CR2E037 (9/96)