

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N50731

(1)

1. Corporation Name

KEN SUMRALL MINISTRIES, INC.



Principal Place of Business

804 FOREST CREEK DRIVE  
PACE FL 32571

Mailing Address

804 FOREST CREEK DRIVE  
PACE FL 32571

3. Date Incorporated or Qualified  
01/07/1992

3a. Date of Last Report  
01/25/1995

2. Principal Place of Business

21 4900 Forest Creek Drive

Suite, Apt. #, etc.

22

City & State  
23 PACE FL

Zip  
24 32571

Country  
25 USA

2a. Mailing Address

26 4900 Forest Creek Drive

Suite, Apt. #, etc.

27

City & State  
28 PACE FL

Zip  
29 32571

Country  
30 USA

4. FEI Number  
59-3100531

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$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 ☒ No

9. Name and Address of Current Registered Agent

SUMRALL, KENNETH I.  
804 FOREST CREEK DRIVE  
PACE FL 32571

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4900 Forest Creek Drive

83

84 City PACE

FL

85 Zip Code 32571

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME SUMRALL, KENNETH I.  
STREET ADDRESS 804 FOREST CREEK DRIVE  
CITY-ST-ZIP PACE FL ☐ DELETE

TITLE D  
NAME SUMRALL, WANDA R.  
STREET ADDRESS 804 FOREST CREEK DRIVE  
CITY-ST-ZIP PACE FL ☐ DELETE

TITLE VD  
NAME SIMPSON, CHARLES V.  
STREET ADDRESS 1101 SAVANNAH STREET  
CITY-ST-ZIP MOBILE AL ☐ DELETE

TITLE STD  
NAME WEAVER, WESLEY J.  
STREET ADDRESS 205 N. 59TH AVENUE  
CITY-ST-ZIP PENSACOLA FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 4900 Forest Creek Drive  
1.4 CITY-ST-ZIP PACE FL 32571 ☒ Change ☐ Addition

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 4900 Forest Creek Drive  
2.4 CITY-ST-ZIP PACE FL 32571 ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH I. SUMRALL

Date

2/27/96 904 994 3178

Daytime Phone #

CR2E037 (12/95)