FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

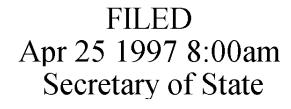
Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(5)

NEW TESTAMENT FAITH MINISTRIES INTERNATIONAL, IN





Principal Place	of Business	Mailing Address							
403B É NEW HAVEN AVE MELBOURNE FL 32901 US		POST OFFICE BOX 100095 PALM BAY FL 32910-0095							
US						3. Date Incorporated or Qualified 09/04/1992	3a. Date of Last 12/23/19		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-0365131 Not Applicable		lot Applicable	
Suite, Apt. (#, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	3	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	Trust Fund Contribution Added to Fees		
Zip	Country Zip			Country		8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29		10			Yes No		
	9. Name and Address of Current	Registered Age	nt		,	10. Name and Address of New Re	gistered Agent		
-				81	Name				
JACKSON, ELIZABETH F 1025 TABAGO TERRACE				82	Street	Address (P.O. Box Number is Not Acceptable)			
	EACH FL 32963		83						
1				-			05 7:-	Code	
				84	City		FL 85 Zip	Code	
Affice or re	to the provisions of Sections 617.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such d	thange was au	thorized b	v the corr	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of changing of the appointment a	its registered is registered	
SIGNATURE						required when reinstaling)	DATE		
					eri signature	ADDITIONS/CHANGES TO OFFIC		DRS IN 12	
12.	PD OFFICERS AND		DELETE	13. 11 TITLE		AUDITIONO/OFF/INGEO TO OFFIC	Change		
NAME	JACKSON, ELIZABETH F.	L) perrie	1.2 NAME					
	1025 TOBAGO TERR				T ADDRESS				
STREET ADDRESS	VERO BEACH FL								
CITY-ST-ZIP	VD		DELETE	1.4 CITY - 2.1 TITLE	ST-ZIP		Change	Addition 6	
TITLE	JACKSON, THOMAS A.	<u>_</u>	_ beccie	2.2 NAME					
NAME	1025 TOBAGO TERR.				T ADDRESS				
STREET ADDRESS	VERO BEACH FL								
CITY-ST-ZIP TITLE	\$D		DELETE	2.4 CITY- 3.1 TITLE	SI-ZIP		Change	Addition	
l	JAMES, VIVIENNE D.	L.	J DECENE	3.2 NAME					
NAME	2429 FALLON BLVD., N.E.				T ADODECC				
STREET ADDRESS	PALM BAY FL			1	T ADDRESS				
CITY-ST-ZIP			DELETE	3.4. CITY- 4.1 TITLE	51-ZIP		Change	Addition	
TITLE	d Lewis, Olivia	_	_ DECENT	4.1 DILE 4. 2 NAME			Jg.		
NAME	99 100TH LANE				T ADDRESS				
STREET ADDRESS	FELLSMERE FL								
City-\$t-ZiP		₹	X DELETE	4.4 CITY-	51 - ZIP	D	Change	Addition	
TITLE	D CI OWEDS SHADON E	. ж	Moccest	5.1 TITLE 5.2 NAME			51kings		
NAME	FLOWERS, SHARON E					WILLIAMS, MICHAEL 403B East New Have	n Avenue		
. STREET ADDRESS	4875 35TH AVENUE			•	T ADDRESS	1			
CITY-ST-ZIP	VERO BEACH FL	देशेच	J neiere	5.4 CITY-		Melbourne, FL 3290		Addition	
TITLE	TD	KIX	DELETE	61 TITLE		T D	Щ спапβе	ALE AUDITION	
NAME **	WILCOX, CONNIE H			6.2 NAME		LEE, RAYE		ļ	
STREET ADDRESS	1605 HOLDER RD				T ADDRESS	1025 TOBAGO TERRAC	E		
CITY-ST-ZIP	TITUSVILLE FL			6.4 CITY-	ST-ZIP	VERO BEACH FL			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated iff Section 19.07(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.