FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9200000243 (7)

HERMAN BAILEY MINISTRIES, INC.													
Principal Place of Business			Mailing Address					T IRMINION OUR LANS THAN BRING BOILD		EBITI BBITB TIBIT BI			
102 24TH ST BELLEAIR BEACH FL 34634 US			102 24TH ST BELLEAIR BEACH FL 33786-3419 US					Data learness and a Continue		Dala at 1 == 1 D		7	
								3. Date Incorporated or Qualified 11/06/1992	3a. I	Date of Last Re 02/09/199	eport 16		
2. Principal Pl	lace of Business	2a.	2a. Mailing Address 26					4. FEI Number 59-3169492	Applied For Not Applicable				
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A		1	
City & State			City & State				6	Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		1	
Zip 24	Country		Zip	Cou	ntry	,	1	3. This corporation has liability for				1	
24	[25] [29] P. Name and Address of Current Regis							D. Name and Address of New Re		<i></i>		1	
	g				81	Name			J			1	
BAILEY, 102 24TH BELLEAIR				i	82 83	Street Add	dress	(P.O. Box Number is Not Acceptat	ole)				
					84	~			FI			1	
11. Pursuant to office or reagent. I as	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig-	2 and 61 of Florid ations of	7.1508, Florida Statut la. Such change was a Section 617.0503, Flo	es, the ab authorized orida Stat	by utes	e-named corpora the corpora s.	porat ation's	ion submits this statement for the part of directors. I hereby accept	ourpose pt the ap	of changing its pointment as	s registered registered	1	
SIGNATURE												1	
12.	Signature, typed or printed name of registered age OFFICERS AN			Registered	Age	ent signature requi	uited wh	en roinstating) ADDITIONS/CHANGES TO OFFIC	DATE	ID DIDECTOR	C IN 10	١,	
TITLE	D	DINEC	DELETE	1.1 1	II F			ADDITIONS/CHANGES TO OFFIC	JENO AF	Change	Addition	- }	
NAME					1.2 NAME					Car oridings		1,	
STREET ADORESS	102 24TH ST					1.3 STREET ADDRESS						8	
CITY-ST-ZIP	BELLEAIR BEACH FL	•			1.4 CITY-ST-ZIP							Š	
TITLE	D		DELETE	2.1 TITLE		11-211				Change	Addition	է	
NAME	MOORE, GARY		_	2.2 NAME		1					_	1	
STREET ADDRESS	7569 SETH RAYNOR PLACE				2.3 STREET ADDRESS								
CITY-ST-ZIP	SARASOTA FL					ST-ZIP						1	
TITLE	······································				3.1 TITLE					Change	Addition	1	
NAME	SIMS, LARRY			3.2 NA	ME								
STREET ADDRESS	9028 SAINT THOMAS LANE			3.3 ST	reet	ADDRESS						1	
CITY-ST-ZIP	CHARLOTTE N.			3.4. Ci	TY-9	ST-ZIP							
TITLE			☐ DELETE	4.1 TH	LÊ					Change	Addition	7	
NAME				4. 2 N	AME							1	
STREET ADDRESS				4.3 ST	REET	ADDRESS							
CITY-ST-ZIP			4.4 CI	TY-\$	T- ZIP						l		
TITLE	☐ DELETE		5.1 10	5.1 TITLE					Change	Addition	7		
NAME				52 NA	ME								
STREET ADDRESS				5.3 ST	REET	ADDRESS							
CITY-ST-ZIP				5.4 CI	IY- S	IT-ZIP							
TITLE			DELETE	6.1 711	LE					Change	Addition	1	
NAME				6.2 NA	ME								
STREET ADDRESS				6.3 ST	REET	ADDRESS						1	

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 arrival poort or supplied ental annual sport 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 contraction of the receiver or trustee empowered to execute this report as required by Chapter 217. Florida Statutes; and that my name appears in Block 12 or block 13 of langest, or on an attachment with an address.

SIGNATURE

CITY-ST-ZIP

4/15/97

FILED

Apr 28 1997 8:00am

Secretary of State