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 # N9300002615 (3)

THE FUTURE IS NOW, MINISTRIES, INC.

Principal Place of Business

1853 WINTERGREEN RD

CARROLLTON TX 75006

Mailing Address

1853 WINTERGREEN RD CARROLLTON TX 75006-7543

US

FILED Mar 25 1997 8:00am Secretary of State



					 Date Incorporated or Qualified 06/04/1993 	3a. Date of Last Report 08/22/1996
	Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 2.C/	pt. #. etc. Springs 26 PD Box 11223 Suite, Apt. #, etc.		1237		75-2513761	Not Applicable
	#, etc. 71G	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	0	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Cac	rallton, TZ Country DEC 25 USA	28 Cuscollton	. TV		Trust Fund Contribution	Added to Fees
Zip	Country	28 Carrollton	Country		8. This corporation has liability for in	
24 75	006 25 USA	29 75011-2237 3	o u	SA		Yes & No
Name and Address of Current Registered Agent			<u> </u>	10. Name and Address of New Registered Agent		
			81	Name		
CRAIG, BILLY G				82 Street Address (P.O. Box Number is Not Acceptable)		
4918 LAVENTANA CIR				Street Address (P.O. Box Number is Not Acceptable)		
PENSACOLA FL 32526			83			
			84	City		E Zip Code
11, Pursuant	to the provisions of Sections 617.0502	and 617,1508, Florida Statutes	the above	-named cor	rooration submits this statement for the or	urnose of changing its registered
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.						
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE.	Signature, typed or printed name of registered agent	t and title it applicable (NOTE: I	Renistered Ans	nt sinner an	uired when reinstating)	DATE
12.	OFFICERS AND		13.	in organization	ADDITIONS/CHANGES TO OFFICE	
TITLE	PDC	DELETE	1.1 TITLE	1	POC	Change Addition
NAME	CRAIG, MARK ALAN	_	1.2 NAME		Craig, Mark Alan	
STREET ADDRESS	1853 WINTERGREEN RD		1.3 STREET	ADDOTES :	2050 Keller Springs, #716	
	CARROLLTON TX				Carrollton, 18 75006	
CHTY-ST-7IP TITLE	VPD	DELETE	1.4 CiTY-S 2.1 TITLE	1-2119	Carrollon, 7x 73000	Change Addition
NAME	CRAIG, BILLY G	Other	2.7 THEE	:		Change C Addition
	ACCOLATECTALS OF					
STREET ADDRESS	DEMOADOLA TV		2.3 STREET			
CITY-ST-ZIP			2.4 CITY - S			Change Addition
Title			3.1 TITLE	1 3	STO COLLEGE	Change Addition
NAME.	ODOM, SENDI CRIAG		3.2 NAME		Odom, Sendi Craig 4918 La Ventana Cir	
STREET ADDRESS	7161 MELBA ST		3.3 STREET	ADDRESS	4418 LAVENIAR CA	
CHY-ST-ZIP	PENSACOLA FL	- I correc	3 4. CITY - S	I-ZIP	fensacula, FL 32526	
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
COTY - ST - ZIP			4.4 CITY-S	T-24P	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELETE	5.1 TITLE	1		Change Addition
NAME.			5.2 NAME	İ		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S	r- <i>‡</i> iP		
THLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	adoress		
CITY-ST-ZIP			6.4 CHTY-S	T- Z IP		
***************************************	by certify that the information supplied	with this filing does not qualify			ed in Section 119 07/3\/i\ Florida Statutes	I further cortifue that the

4. 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:

MARK HIBM CORNER

03-21-97 972-418-0809

CR2E037 (9/96)