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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

JESUS	CHRIST'S HOUSE OF PRA	VER INC						
00000	Office of Tools of The	ATEN, NO						
Principal Place	e of Business	Mailing Address				18404		
30 SOUTH PAR	RRAMORE	7235 PINION DR.			3. Date incorporated	or Qualified		
ORLANDO FL 32825		ORLANDO FL 32818						
\$		US			4. FEI Number		I A	pplied For
					59-321107	5	N	ot Applicabl
7 40 4 4	lace of Business	2a. Mailing Address			5. Certificate of Statu	s Desired		Additional
Suite, Apt	W. Robinson Street	Suite, Apt. #, etc.			6. Election Campaign	Einonoina	\$5.00	equired
]	.,	27			Trust Fund Contrib	-	Added to	
City & State	، رمیم	City & State			7. Is this nonprofit of			
Orlan		28					Yes 🔲 No	
Zip ` こまつじん	Country	Zip	Country		8. This corporation o	•		_ ~
3282	5 25 U.S 9. Name and Address of Curren	29	30		Personal Property 10. Name and Addre			No
	g. Hallo and Address of Culton	r nagisteren Agent	81	Name	IV. Halle allu Auure	se of feet fregi	atelen vileit	
IONES (CIMENDOI AN Y							N-
JONES, GWENDOLYN A 4519 Mobileaire Dr			82	Street	Address (P.O. Box Number is	Not Acceptable	·)	
	O FL 32822		83			··· ·· ·· ·	···········	
	***************************************		84	City			as 7in	Code
			57	City			FL 85 Zip	Code
agent. Lar	to the provisions of Sections 617.050; egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was ations of, Section 617,0503, F	authorized by Iorida Statutes	rue cort	poration's board of directors. I	nereby accept	the appointment as	registereo
	Signature, typed or prented hance of registered ages				required when reinstating)		DATE	
	Signature, typed or printed name of registered ages	of and life if applicable (NO D DIRECTORS					DATE	
2.	OFFICERS AND	of and title if applicable (NO	TE: Registered Ago		required when reinstating)		DATE	RS IN 12
2. TLE AME	OFFICERS AND PD JONES, LESTER A.	of and life if applicable (NO D DIRECTORS	13. 1.1 TITLE 1.2 NAME	ni signature	required when reinstating)		DATE RS AND DIRECTOR	RS IN 12
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Secretary of State