FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 JUN 27 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003739 (0)

1. Corporation Name
EZRA MINISTRIES, INC.

Principal Place of Business	Mailing Address
5344 WOODLAND LAKES DR. SUITE 220 PALM BEACH GARDENS FL 33418	P.O. BOX 30505 PALM BEACH GARDENS FL 33420

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/18/1993
3a. Date of Last Report: 09/02/1994
4. FEI Number: ~~APPLIED FOR~~ 65-0448124 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

YARICK, WILLIAM W
5344 WOODLAND LAKES DR.
SUITE 220
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/D	1.1 TITLE	☐ Change ☐ Addition
NAME	YARICK, MARK E	1.2 NAME	700001528787
STREET ADDRESS	5344 WOODLAND LAKES DR., SUITE 220	1.3 STREET ADDRESS	-07/03/95--01003--016
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	1.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	YARICK, WILLIAM W	2.2 NAME	
STREET ADDRESS	5344 WOODLAND LAKES DR., SUITE 220	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	VAN WYHE WILLIAM	3.2 NAME	
STREET ADDRESS	7720 STONE HARBOUR DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33466	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	D ☐ Change ☑ Addition
NAME		4.2 NAME	WILLIAM HOCHSTETTLER
STREET ADDRESS		4.3 STREET ADDRESS	P.O. Box 2863
CITY-ST-ZIP		4.4 CITY-ST-ZIP	W.P. BCH, FL. 33402
TITLE		5.1 TITLE	D ☐ Change ☑ Addition
NAME		5.2 NAME	RONALD OWENS
STREET ADDRESS		5.3 STREET ADDRESS	1616 So MILITARY TR.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	W. P. BEACH, FL. 33415
TITLE		6.1 TITLE	D ☐ Change ☑ Addition
NAME		6.2 NAME	DAVID FRAZIER
STREET ADDRESS		6.3 STREET ADDRESS	2343 FLORIDA MANGO RD.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	W.P.B. FL 33406

~~RETURNED BY MAY 1~~

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)(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: William W Yarick 4-14-95 (407)626-2749
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

004470