


FILE NOW: FILING FEE IS \$61.25

FILED

May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N93000004191 (3)**

1. Corporation Name

JESUS HEADQUARTER TEACHING AND TRAINING MINISTRIES, INC.



Principal Place of Business

Mailing Address

17409-11 S DIXIE HWY
MIAMI FL 33157
US

P. O. BOX 971476
MIAMI FL 33197-1476
US

3. Date Incorporated or Qualified
09/16/1993

3a. Date of Last Report
02/28/1996

2. Principal Place of Business

2a. Mailing Address

21 **17414 S.W. 108th**

26 **P. O. BOX 971476**

4. FEI Number
65-0434637

Applied For
Not Applicable

22 **Miami FL**

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

23 City & State

28 City & State

Miami FL 33197-1476

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 **33157**

25 Country

Dade

29 **33197-1476**

30 Country

Dade

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCOTT, LARRY L
P. O. BOX 971476
MIAMI FL 33197

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 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.

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

TITLE **P** ☐ DELETE

NAME **SCOTT, LARRY L**
STREET ADDRESS **17414 SW 108 COURT**
CITY-ST-ZIP **MIAMI FL**

TITLE **VP** ☐ DELETE

NAME **SCOTT, THEODORA P**
STREET ADDRESS **17414 SW 108TH COURT**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ DELETE

NAME **SMITH, LADENE**
STREET ADDRESS **10930 SW 143RD TERR**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **D** ☐ DELETE

NAME **LAMPKINS, ROBERT**
STREET ADDRESS **10235 SW 172 ST**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE **D** ☐ DELETE

NAME **RIGGINS, RUTH**
STREET ADDRESS **549 S.W. 17 TERR**
CITY-ST-ZIP **HOMESTEAD FL**

TITLE **D** ☐ DELETE

NAME **SHELTON, CAROLYN**
STREET ADDRESS **63523 NW 1ST AVE**
CITY-ST-ZIP **MIAMI FL 33150**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☐ Change ☐ Addition

1.2 NAME **Scott, Larry L**
1.3 STREET ADDRESS **17414 S.W. 108th**
1.4 CITY-ST-ZIP **Miami FL 33157**

2.1 TITLE **VP** ☐ Change ☐ Addition

2.2 NAME **Scotts Theodora P**
2.3 STREET ADDRESS **17414 S.W. 108th**
2.4 CITY-ST-ZIP **Miami FL**

3.1 TITLE **D** ☐ Change ☐ Addition

3.2 NAME **Smith, Ladene**
3.3 STREET ADDRESS **10930 S.W. 143rd**
3.4 CITY-ST-ZIP **Miami FL 33176**

4.1 TITLE **D** ☐ Change ☐ Addition

4.2 NAME **Lampkins, Robert**
4.3 STREET ADDRESS **10235 S.W. 172st**
4.4 CITY-ST-ZIP **Miami FL 33157**

5.1 TITLE **D** ☐ Change ☐ Addition

5.2 NAME **Riggins Ruth**
5.3 STREET ADDRESS **549 S.W. 17th**
5.4 CITY-ST-ZIP **Homestead FL**

6.1 TITLE **D** ☐ Change ☐ Addition

6.2 NAME **Shelton, Carolyn**
6.3 STREET ADDRESS **63523 N.W. 1st Ave**
6.4 CITY-ST-ZIP **Miami FL 33150**

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 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:

Larry L Scott

4-20-97 305-255-8086

CR2E037 (9/96)