FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

by SIGNOF CORPORATIONS

N93000004778 (7) DOCUMENT #

ZEPHYRHILLS MINISTERIAL ASSOCIATION, INC.

					1 1 6 6 14 14 1 4 14 14 1			
Principal Place of Business Mailing Address						8111 66 011 66 111 86 111 6 161		
P.O. BOX 13 ZEPHYRHILLS		P.O. BOX 1363 ZEPHYRHILLS FL 33539						
					3. Date Incorporated or Qualified 10/21/1993		Last Report 18/1995	
[En]		2a. Mailing Address 26	¬ -		4. FEI Number 59-3222167		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1741	SE	Not Applicable 3.75 Additional	
City & State		City P State			5. Certificate of Status Desired	, , , , , , , , , , , , , , , , , , ,	Fee Required	
23		City & State	 		Election Campaign Financing Trust Fund Contribution	∀ '	5.00 May Be	
Zip	Country	Zip	Country		This corporation has liability for		ler s. 199.032.	
24	25 9. Name and Address of Curre	29 Pagistared Agent	30		Florida Statutes			
	9, Marine and Address of Curre	nt Hegistered Agent	81 Na	ame	10. Name and Address of New	Registered Agent		
ODOM. :	STEPHEN		01 140	Terrell L. Harper				
38300 FIFTH AVE			82 St	treet Address	dress (P.O. Box Number is Not Acceptable) 6040 8th Street			
ZEPHYRHILLS FL 33541						360	· · · · · · · · · · · · · · · · · · ·	
					rhills			
			84 Cit	· Zanh	yrhills	FL 85	Zip Code 33540	
	to the provisions of Sections 617.050; red agent, or both, in the State of Flori th, and second the obligations of Sec		, the above-name					
	ith, and sceept the obligations of Sec		i by the corporate	On S DOARD O	or directors, i nereby accept the ap	pointment as registe	ered agent. I am	
SIGNATURE .		arjan				2/22/96		
12.	Signal ire, typed or printed name of registored agent and till, if applicable. NOTE: Registor OFFICERS AND DIRECTORS 13			nature required whe		DATE	07000 11140	
TITLE	D	M DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OF	FFICERS AND DIRE		
NAME	HOLLYFIELD, W G		1.2 NAME	X.	C. Bryant		Me X	
STREET ADDRESS	5510 NINETEENTH ST		1.3 STREET ADDR	RESS 33	425 State Rd.	54 W.		
CITY - S1 - ZIP	ZEPHYRHILLS FL 33540		1.4 CITY-ST-ZIP		phyrhills, FL		9	
TITLE	D HADDED TEDDELL I	DELETE	2.1 TITLE	Q		Chan		
NAME STREET ADDRESS	HARPER, TERRELL L 6040 8TH ST		2.2 NAME	- Ch	uck Hughes		ļ	
CITY-ST-ZIP	ZEPHYRHILLS FL 33540		2.3 STREET ADDR		51 Ft. King Rd.			
TITLE	D	₩ DELETE	2 4 CITY-ST-ZIP 3 1 TITLE		phyrhills, FL 3	33541 Chan	Addition	
NAME	ODOM, STEPHEN	W	3 2 NAME	Ro	n Rodgers		nge 🗶 Addition	
STREET ADDRESS	38300 FIFTH AVE		3.3 STREET ADDRE		0. Box 173			
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		3 4. CITY - ST - ZIP	Zej	phyrhills, FL 3	33539		
TITLE	D	₩ DELETE	4.1 TITLE			☐ Chan	nge 🔲 Addition	
NAME	PAUL, RICHARD		4. 2 NAME					
STREET ADDRESS	38635 FIFTH AVENUE ZEPHYRHILLS FL		4.3 STREET ADDRI	ESS				
CITY-ST-ZIP TITLE	ZEFITIANILLO FL	DELETE	4 4 CiTY-ST-ZIP	<u> </u>				
NAME		Dorreit	5.1 TITLE 5.2 NAME			☐ Chan	ige 🔲 Addition	
STREET ADDRESS			5.3 STREET ADDRE	.ecc				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				[
TITLE		DELETE	6.1 TITLE		— <u>————————————————————————————————————</u>	☐ Chan	ge Addition	
NAME			6.2 NAME				,	
STREET ADDRESS			6 3 STREET ADDRE	ESS				
CrTY-ST-ZiP	and the Administration of the Administration		64 CITY-ST-ZIP					
14. Too riereby	y certify that the information supplied v	with this filing is voluntarily furnish	ed and does not	qualify for th	ie exemption stated in Section 119	3.07(3)(k) Florida Str	atutes 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _

OFFICER OR DIRECTOR

2/22/96

813-782-1071

Daytime Phone #