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May 20 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N93000005217 (5)

1. Corporation Name

MIAMI SCHOOL OF URBAN MINISTRY AND MISSIONS, INC
(MISUMM)

Principal Place of Business

Mailing Address

12000 SW 88 ST
MIAMI FL 33183
US

P.O. BOX 033737
12000 SW 76 ST 0145
MIAMI FL 33266-3737
US



2. Principal Place of Business

2a. Mailing Address

21 ELIM BIBLE INSTITUTE

26 ELIM BIBLE INSTITUTE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 7245 COLLEGE ST

27 7245 COLLEGE ST

City & State

City & State

23 LIMA, NY

28 LIMA, NY

Zip

Country

Zip

Country

24 14485

25 USA

29 14485

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WITTMAN, WILLIAM M, ESQ.
12000 SW 88 ST
SUITE 145
MIAMI FL 33183

81 Name

SAME C/O PALMER, PALMER & MANGIARDI, PA.

82 Street Address (P.O. Box Number is Not Acceptable)

12790 SOUTH DIXIE HWY.

83

84 City

MIAMI

FL

85 Zip Code

33156

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 W. M. Wittman Esq.

WILLIAM M. WITTMAN, ESQ

2/5/97

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 DP ☒ DELETE

NAME WITTMAN, WILLIAM M

STREET ADDRESS 12000 SW 88RD ST

CITY-ST-ZIP MIAMI FL 33183

TITLE ~~VP~~ ☒ DELETE

NAME ~~TITLEY, PIERRE~~

STREET ADDRESS ~~12010 SW 40 DR APT. 216 B.~~

CITY-ST-ZIP ~~MIAMI FL~~

TITLE D ☐ DELETE

NAME VELLEKOOP, HARRY V

STREET ADDRESS 7418 E MAIN ST

CITY-ST-ZIP LIMA NY 14485

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

PRESIDENT/DIRECTOR

☒ Change ☐ Addition

1.2 NAME

PAUL JOHANSSON

1.3 STREET ADDRESS

7245 COLLEGE ST.

1.4 CITY-ST-ZIP

LIMA, NY 14485

2.1 TITLE

DIRECTOR

☒ Change ☐ Addition

2.2 NAME

ROBERTO COLLOCA

2.3 STREET ADDRESS

6300 NW 77 COURT

2.4 CITY-ST-ZIP

MIAMI, FL 33166

3.1 TITLE

V.P., SEC., TREAS. / DIRECTOR

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

100002199711

☐ Change ☐ Addition

5.2 NAME

-06/03/97--01044--025

5.3 STREET ADDRESS

***61.25

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CS

5/20/97

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.

CR2E037 (9/96)