## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUI	MENT # N9300	0005257 (1)	)				
LAST DAYS MINISTRIES, INC.							
Principal Plac	e of Business	Mailing Address				1888) Bille 1188) Billi 1881 1881	
410 BASSADENA CIRCLE LAKELAND FL 33805 LAKELAND FL 33805					3. Date Incorporated or Qualified		
					11/19/1993		
					4. FEI Number	Applied For	
9 Principal P	lace of Business	2a. Mailing Address			NOT APPLICABLE	Not Applicab	
21	iace of bosiness	26			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be	
22 City 9 Stat		City 9 State			Trust Fund Contribution	Added to Fees	
City & Stat	e	City & State			7. Is this nonprofit corporation a homeowns  Tyes	ers association?	
Zip	Country	Zip	Country		8. This corporation owes or has paid the cu		
24	25	29	30		Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curre	nt Registered Agent	81		10. Name and Address of New Registered	Agent	
				Name			
	HINTON, WILLIE 410 BASSADENA CIRCLE			Street Add	ress (P.O. Box Number is Not Acceptable)		
	ND FL 33805		83				
			84	City		85 Zip Code	
			امرا	City	Fl	B5 Zip Code	
agent. I a	m familiar with, and accept the oblig	gations of, Section 617.0503, Fluent and little if applicable.  (NO	orida Statutes E Registered Age	3.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap ired when reinstaing)  DATE		
12. TITLE	OFFICERS AN	ND DIRECTORS  DELETE	13,	<del></del>	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12  Change Addition	
NAME	HINTON, WILLIE		1.1 HILE 1.2 NAME	}		C change C Mount	
STREET ADDRESS	410 BASSADENA CIRCLE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33805		1.4 CITY-S	- 1			
TITLE	DV	DELETE	2.1 TITLE			Change Addition	
NAME	GIBSON, CHARLES		2.2 NAME	1			
STREET ADDRESS	1200 SHERWOOD OAK LAKELAND FL 33805			ADDRESS			
CITY-ST-ZIP	DS	DELETE	2. 4 CITY-5 3.1 TITLE	S1-20P		Change Addition	
MAME	GIBSON, RANDY	<del>-</del>	3.2 NAME				
STREET ADDRESS	410 BASSADENA CIRCLE		3.3 STREET	ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33805		3.4, CITY - S	ST-ZIP			
TITLE	DY	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	
NAME	HINTON, JERELEN		4. 2 NAME				
STREET ADDRESS	410 Bassadena Circle Lakeland Fl		4.3 STREET				
CITY-ST-ZIP TITLE	DAVEDAND FE	DELETE	4.4 CiTY-S 5.1 TITLE	1-289		Change Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	·	5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP			6.4 CITY - S	T-ZIP			

14. I 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Willie Hoston 4.23-1498

**FILED** 

May 15 1998 8:00am

Secretary of State

R2E037 (10/97)