FILE	NOW:	FILING	FEE IS	\$61.25
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NONPROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

	JAL REPORT 1996	Secretar	. Mortnam y of State ORPORATIONS					
1996 DIVISION OF CORPORATIONS DOCUMENT # N 9300005493 1. Corporation Name								
Lion's Principal Place	Roar Ministries	Inc. Mailing Address						
0.5 =		20		3. Date Incorporated or Qualified	3a. Date of Last	Report		
2 Principal Pi	rest wood Dr. Clerma	2a. Mailing Address		1 2 / 7 / 93 4. FEI Number	APY:)			
	Forestwood Dr.	⊢			├ ─┼	Applied For		
Suite, Apt.	#, etc.	Suite Apt. #, etc.		59-3213-754		Not Applicable		
22		27		Certificate of Status Desired		Additional Required		
City & State	e	City & State		6. Election Campaign Financing				
23 Clery	mont, Fl.	28		Trust Fund Contribution		0 May Be d to Fees		
Zip	Country	Zıp	Country	8. This corporation has liability for in				
24 3471			30		Yes ☑No	, OS. OOE,		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent			
·			81 Name	19 1				
,			82 Street	Rick Van Wagner Address (P.O. Box Number is Not Acceptable	e)			
			80	5 Forestward Dr.				
			83	··· - · - · -				
•			84 City		0E 7m	Codo		
•		ryuent,		Code 4 7 1\				
11. Pursuant i	to the provisions of Sections 617.0502 a	nd 617.1508, Florida Statutes,	the above named co	prporation submits this statement for the purp board of directors. I hereby accept the appo	ose of changing its re	egistered office		
familiar wi	th, and accept the obligations of, Section	n 617.0503, Florida Statutes.	by the corporation s	board or directors. I hereby accept the appoint	intment as registered	agent. I am		
SIGNATURE	Rich Van Wagnes	. Rick Van W.		ı.				
	Richs Van Wagner Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	Registered Agent signature	equired when reinstating)	5-30-46 DATE	_{[2}		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		FIS IN 12 Addition Addition		
TITLE	President	DELETE	1 1 TITLE		Change	Addition E		
NAME	RICK Van Wagner		1 2 NAME			l ≿		
	805 Forestweed Dr		1.3 STREET ADDRESS			E		
CITY - ST - ZIP	Clermont, Fl. 34711 Vice-President		1.4 CHTY-ST-ZIP			&		
TITLE		DELETE	21 THILE		Change	☐ Addition ☐		
NAME	Jeff Philips		2 2 NAME					
STREET ADDRESS			23 STREET ADDRESS					
CITY - ST - ZIP	Winter Park, F1. 3279	3	2 4 CiTY-ST-ZIP					
	Treasurer	DELETE	3 1 TITLE		Change	☐ Addition		
NAME	Tim Wilkinson	. 44	3.2 NAME					
STREET ADDRESS	3500 University Blud N		3 3 STREET ADDRESS					
CITY-ST-ZIP TITLE	Jacksonville, Fl. 32277 Secretary	P	3.4 CITY-ST-ZIP					
		□ DELETE	4.1 TITLE	Secretary/ Treasurer	☐ Change	▼ Addition		
NAME STORET ADDRESS	Rad Yaun 805 Parktruit Dr.		4 2 NAME	Rad Yaun				
STREET ADDRESS			4 3 STREET ADDRESS	805 Parktrait Dr.		ĺ		
CITY-ST-ZIP TITLE	Clernont, Fl. 34711		4.4 City - St - ZiP	clerment, F1. 3471)				
NAME		DELETE	5 1 TITLE		☐ Change	Addition		
			5.2 NAME			ŀ		
STREET ADDRESS			5 3 STREET ADDRESS			İ		
CITY-ST-ZIP		Florier	5.4 CITY-ST-ZIP					
TITLE		DELETE	6 1 TITLE	70000187	Series Define	☐ Addit∙on		
NAME			6 2 NAME	-06/24/960104	+0==002			
STREET ADDRESS			6 3 STREET ADDRESS	***70.00				
CITY-ST-ZIP	nodifithat the left	A- Al-Y- Fl	6 4 CITY - ST - ZIP		<u>.</u>			
••• I do nereb	ly certify that the information supplied wit	n this filing is voluntarily furnish	ed and does not qua	lify for the exemption stated in Section 119.0	7(3)(k). Florida Statute	s Lighter W		

certify that the information supplied with this tiling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further 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 hand appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: Pick Van Wagner 5-30-76 352-394-1965 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR Date Daylone Prone &