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

N9400001673 (2) DOCUMENT

SHINING LIGHT BIBLE CHURCH, INC.

FILED Apr 23 1998 8:00am Secretary of State

to Incorporated or Qualified	

And the second s				1 (111) 111 111 111 111 111 111 11					
Principal Place	of Business	Mailing Address							
501 N BENEVA		P O BOX 7865			l	3. Date Incorporated or Qualified		1	
SUITE 600 & 61 SARASOTA FL		SARASOTA FL 34278 US				04/01/1994			
US	34232	05			Ī	4. FEI Number	Ar	pplied For	
						65-0479904	No	ot Applicable	
2. Principal Pl	ace of Business	2a. Mailing Address				6. Certificate of Status Desired	\$8.75 / Fee Re		
Suite, Apt.	#, etc	Suite, Apt. #, etc.			- 1	6. Election Campaign Financing	\$5.00	May Be	
22		27				Trust Fund Contribution	Added to		
City & State	•	City & State				7. Is this nonprofit corporation a homeowners association?			
Zip	Country	Zip Country				Yes ZNo 8. This corporation owes or has paid the current year Intangible			
21µ 24	25	<u> </u>	10 COUIL	y		Personal Property Tax due June 30.		No No	
[24]	9. Name and Address of Current		<u> </u>		1	10. Name and Address of New Register			
			81	Name					
	ACH, STEPHEN A		8:	Street	t Addres	s (P.O. Box Number is Not Acceptable)			
3	itpointe PKWY Ita Fl 34232		B:						
ONENOC	TATE OTEGE		84	City			- 85 Zip (Code	
				1 '			*L		
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 ager	and tille if applicable (NOTE:	Registered A	sent signatur	re required	when reinstaling) DAT	F		
12.	OFFICERS AND		13.	port algrical	o regenue	ADDITIONS/CHANGES TO OFFICERS /		IS IN 12	
TITLE	D	DELETE	1.1 TITLE				Change	☐ Addition	
RAME	SCHLABACH, STEPHEN A		1.2 NAME					ļ	
STREET ADORESS	673 EASTPOINTE PKWY		1.3 STREE	T ADDRESS	:				
CITY-ST-ZIP	SARASOTA FL		1.4 CITY	ST-ZIP					
TITLE	D	☐ DELETE	2.1 TITLE		D		Change	☐ Addition	
NAME	SCHLABACH, JENNIFER		2.2 NAME		Sch	hlabach, Jennifer			
STREET ADDRESS	3019 WILLOW GREEN		2.3 STREE	T ADDRESS	67	hlabach, Jennifer 7 East Pointe PKW	Y	į	
CITY-ST-ZIP	SARASOTA FL 34235		2.4 CITY	- ST - ZIP	Sar	asota, Fl 34282			
TITLE	D	☐ DELETE	3.1 TITLE			•	☐ Change	Addition	
NAME	YUTZY, CLARENCE		3.2 NAME		ĺ				
STREET ADDRESS	5960 BROWN LA		3.3 STREE	T ADDRESS	· [
CITY-ST-ZIP	SARASOTA FL 34232		3.4. CiTY		↓				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAM						
STREET ADDRESS				T ADDRESS	·				
CITY-ST-ZIP		- I prieze	4.4 CITY		+		Change	Addition	
TITLE		☐ DELETE	5.1 TITLE				டுபன்று	- Auguston	
NAME			5.2 NAMI		.				
STREET ADDRESS				T ADDRESS	·			ļ	
CITY-ST-ZIP		DELETE	5.4 CITY				Change	Addition	
TITLE		רין הברבוב	6.1 TITLE				ட மன்ற	Addition	
NAME			6.2 NAMI		.				
STREET ADDRESS				ET ADORESS	`				
CITY-ST-ZIP			6.4 CITY	ST-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 careful protein 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 phanged, or on an attachment with an address.

941 379-5005