FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT #**

N94000004007 (0)

1. Corporation	n Name				` '					
ILLUMINATION MINISTRIES, INC.) 1 hadhhar ann 1811 Baint Bhaint Bhaint Bhaint Baint Baint Baint Baint Bhaint Baint Baint Baint Baint Idal (Dat			
Principal Place of Business Mailing Address										
2064 SW PITTS TER 2064 SW PITTS TER STUART FL 34997 STUART FL 34997									3. Date Incorporated or Qualified 08/16/1994	
									4. FEI Number Applied For	
									65-0676173 Not Applicable	
2. Principal Place of Business				2a. Mailing Address 26					5. Certificate of Status Desired S8.75 Additional Fee Required	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				,	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State				City & State					7. Is this nonprofit corporation a homeowners association?	
23				28					Yes No	
Zip		Country		Zip		Cour	ıtry		8. This corporation owes or has paid the current year Intangible	
24		25		29		30			Personal Property Tax due June 30. Yes No	
	9. Name	and Address	of Current R	Registered Ager	<u>. </u>		81	Name	10. Name and Address of New Registered Agent	
								Harrie		
YOUNG, MARY D 2064 SW PITTS TER							82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
_	FL 34997					<u> </u>	83			
SIUMAI	FL 34997						_			
						1	84	City	FL 85 Zip Code	
11. Pursuant	to the provis	sions of Sectio	ns 617.0502 a	and 617.1508, FI	orida Statuti	es, the ab	ove	-named co	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
office or ragent. I a	egistered ag m familiar w	gent, or both, i ith, and accer	n the state of at the obligation	ons of, Section 6	17.0503, Fid	orida Statu	ites		stations board of directors. Thereby accept the appointment as registered	
SIGNATURE								 	squired when reinstaling) DATE	
12.	Signature, types		registered agent a ICERS AND E	nd title if applicable	(NOTI	13.	Ager	nt a gnature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	OIT	IGENO AND E		DELETE	1.1 101	LE		Change Addition	
NAME	- .	, MARY D		-		1.2 NAI	ME			
STREET ADDRESS		W PITTS TEI	₹ .			1.3 STF	REET .	ADDRESS		
CITY-ST-ZIP		T FL 34997	•			1.4 CIT		i		
TITLE	DV				DELETE	2.1 TIT	LE		☐ Change ☐ Addition	
NAME	YOUNG	i, FREDERIC	KJSR			2.2 NA	ME	1		
STREET ADDRESS					2.3 \$			ADDRESS		
CITY - ST - ZIP		T FL 34997				2 4 CI	TY-S	T-ZIP		
TITLE	DST				DELETE	3 1 117	LE		Change Addition	
NAME		F, HAILEY L	_			3 2 NA				
STREET ADDRESS		e geneva d)R			1		ADDRESS		
CITY-ST-ZIP	STUAR	I FL			DELETE	3.4. CI		T- ZIP	Change Addition	
TITLE					DECETE	4.1 717				
NAME						4. 2 NA		I DDDCCC		
STREET ADDRESS								ADDRESS		
CITY-ST-ZIP TITLE					DELETE	4.4 CIT 5 1 TIT		1-21	Change Addition	
NAME				-		5.2 NA			_ ,	
STREET ADDRESS								ADDRESS		
CITY-ST-ZIP						5.4 CIT		- 1		
TITLE					DELETE	61111			☐ Change ☐ Addition	
NAME						6.2 NA	ME			
STREET ADDRESS	ŀ					6.3 ST	REET	ADORESS		

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 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.

Hailey L. Ralliff 5.2.98

561-383-3655 Daylime Phone # 0073689

FILED

May 15 1998 8:00am

Secretary of State