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FILED
May 14 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N94000004158 (1)

1. Corporation Name

OHMEOMIAH MUSIC MINISTRIES, INC.



Principal Place of Business

Mailing Address

520 LEXINGTON ST.
DUNEDIN FL 34698
US

520 LEXINGTON ST.
DUNEDIN FL 34698-7922
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/22/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3261050

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME MAHARREY, MICHAEL R
STREET ADDRESS 520 LEXINGTON ST.
CITY-ST-ZIP DUNEDIN FL

TITLE SD
NAME MAHARREY, REGINA S
STREET ADDRESS 520 LEXINGTON ST.
CITY-ST-ZIP DUNEDIN FL

TITLE D
NAME BOUT, DAVID
STREET ADDRESS 1512 CALIFORNIA PKWY NORTH
CITY-ST-ZIP FT. WORTH TX

TITLE D
NAME BOUT, BRENDA
STREET ADDRESS 1512 CALIFORNIA PKWY
CITY-ST-ZIP FT. WORTH TX

TITLE DVP
NAME EARLS, JEFFRY
STREET ADDRESS 1114 LEMON ST.
CITY-ST-ZIP TARPON SPRINGS FL

TITLE D
NAME EARLS, MJE
STREET ADDRESS 1114 LEMON ST.
CITY-ST-ZIP TARPON SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 authorized 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

4-21-97

802 214 8322

CR2E037 (9/96)