

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000004339

1. Corporation Name

INCREASE MINISTRIES, INC.

Principal Place of Business

5046 KEATON CREST DR
ORLANDO FL 32837
US

Mailing Address

P.O. BOX 690291
ORLANDO FL 32869
US

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90086 024 ****61.25



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

09/06/1994

4. FEI Number

59-3260217

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

9. Name and Address of Current Registered Agent

TANNER, SAM E
5046 KEATON CREST DR
ORLANDO FL 32837

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)

5-1-99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME CHEWNING, CHARLES G
STREET ADDRESS 2686 MERRIE OAKS ROAD
CITY-ST-ZIP WINTER PARK FL 32792

TITLE D ☐ DELETE
NAME TANNER, SAM E
STREET ADDRESS 5046 KEATON CREST DR
CITY-ST-ZIP ORLANDO FL 32837

TITLE D ☐ DELETE
NAME WEST, TIM B
STREET ADDRESS 10455 WATER HYACINTH DRIVE
CITY-ST-ZIP ORLANDO FL 32825

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☐ Change ☒ Addition
1.2 NAME Russell Skrabut
1.3 STREET ADDRESS 2217 Chadbourn Ct.
1.4 CITY-ST-ZIP Orlando, FL 32837

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

3.1 TITLE ~~Director~~ ☒ Change ☐ Addition
3.2 NAME Tim B. West
3.3 STREET ADDRESS 714 Waterkind Ct.
3.4 CITY-ST-ZIP Orlando, FL 32828

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED Sam Tanner

5-1-99

(407) 888-2526

Date

Daytime Phone #

CR2E037 (11/98)