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FILED

Jan 15 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000005041 (8)

1. Corporation Name

THE CURRY MINISTRIES INC.

769 Creek Water Terrace #115 P.O. Box 2332 Sanford, FL 32772

Principal Place of Business Lake Mary, FL Mailing Address

9103 STONEBROOK DR  
SANFORD FL 32773  
USP O BOX 2332  
SANFORD FL 32772-2332  
US3. Date Incorporated or Qualified  
10/12/19943a. Date of Last Report  
01/26/1996

2. Principal Place of Business

21 769 Creek Water Terrace #115

2a. Mailing Address

26

Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

# 115

23 City &amp; State

Lake Mary, FL

24 Zip

32746

Country

USA

29 Zip

30

Country

4. FEI Number

59-3272232

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐ \$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CURRY, ROBERT E JR.  
9103 STONEBROOK DR  
SANFORD FL 32773

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

769 Creek Water Terrace #115

B3

B4 City

Lake Mary

FL

B5 Zip Code

32746

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

1-6-97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME CURRY, ROBERT E JR.  
STREET ADDRESS 9103 STONEBROOK DR  
CITY-ST-ZIP SANFORD FLTITLE D ☐ DELETE  
NAME CURRY, ROBERT E III  
STREET ADDRESS 9103 STONEBROOK DR  
CITY-ST-ZIP SANFORD FLTITLE D ☐ DELETE  
NAME GRAY, KATHLEEN P  
STREET ADDRESS 1176 LOST TRAIL  
CITY-ST-ZIP FORT WALTON BEACH FL 32547TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

769 Creek Water Terrace #115  
Lake Mary, FL 32746

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

769 Creek Water Terrace #115  
Lake Mary, FL 32746

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-97

Date

(407) 330-4563

Daytime Phone # 0014690

CR2E037 (9/96)