FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

N95000000366 (3)

WORLDWIDE BROADCASTING MINISTRIES, INC.

Principal Place	e of Business	Mailing Address			I CORNIGO BIN TEND BANK BEIN ORDIN ORDIN ORDIN ORDIN ORDIN DINE CINIO BIN SOE!
6400 N.W. 106TH PLACE #9 ALACHUA FL 32615		P.O. BOX 357 Gainesville FL 32602-0357 US			3. Date Incorporated or Qualified 01/01/1995
US					4. FEI Number Applied For Not Applicable
2. Principal Place of Business 2a. Mailing Address 1704 NW 8th AVE. 26					5. Certificate of Status Desired \$8.75 Additional Fee Required
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State	n e sville, Fl.	City & State			7. Is this nonprofit corporation a homeowners association?
Zip Country		Zip Country		-	8. This corporation owes or has paid the current year Intangible
24 326			30		Personal Property Tax due June 30. 🔲 Yes 🛂 No
 _	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered Agent
WAVE CO PARENT O			01	Name	Robert G. Voyles
VOYLES, ROBERT G 8400-9 N.W. 108TH PLACE			82	Street	Address (FO Box Number is Not Acceptable)
ALACHUA FL 32615			83		
	1		84	City	Solution 85 Zip Code
		- 1015 F			Gainesville.
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.					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE .	Signature, lyped or printed name of registered ager	all and little if applicable. (NOTE:	Registered Age	ni signature	required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE		PD 🔀 Change 🗆 Addition
NAME	VOYLES, ROBERT G		1.2 NAME		Voyles, Robert G
STREET ADDRESS	6400-9 N.W. 106TH PLACE		1.3 STREET	ADDRESS	1704 NW 8th Ave.
CITY-ST-ZIP	ALACHUA FL	DELETE	1.4 CITY-S	t - ZiP	Gainesville, Fl 32603
TITLE	NOVI EC TAMES IN	L.J DELETE	2.1 TITLE		L Change L Addition
NAME	VOYLES, JAMES W 1704 N.W. 8TH AVE.		2.2 NAME		
STREET ADDRESS	GAINESVILLE FL 32603		2.3 STREET		
CITY-ST-ZIP TITLE	STD	DELETE	2. 4 CITY-5	ST - ZIP	STD & Change Addition
NAME	VOYLES, ALICE M		3.2 NAME		Voyles, Alice M
STREET ADORESS	6400-9 N.W. 106TH PLACE		3.3 STREET	ADDRESS	1704 NW 8th Ave.
CITY-ST-ZIP	ALACHUA FL		3.4. CITY - S		Gainesville, Fl. 32603
TITLE	0	DELETE	4.1 TITLE		D Change Addition
NAME	WATSON, DENNIS G DR.		4. 2 NAME		Burnham, Bill
STREET ADDRESS	552 5 N.W. 55TH LANE		4.3 STREET	ADDRESS	1985 Old Fountain Rd.
CITY-ST-ZIP	GAINESVILLE FL		4.4 CITY - S	T-ZIP	Lawrenceville, Ga. 30243
TITLE	D	☐ DELETE	5.1 TITLE	_	Lawrenceville, Ga. 30243 Change Addition
NAME	MEHL, THOMAS S		5.2 NAME		
STREET ADDRESS	22904 S.W. 30TH AVE.		5.3 STREET	-	
CITY-ST-ZIP	NEWBERRY FL	DELETE	5.4 CITY - S	T-ZIP	D Change Addition
TITLE	D BITIED TEDDY	☐ DECEIC	6.1 TITLE) · · · · · · · · · · · · · · · · · · ·
NAME OTDEET ADDRESS	BUTLER, TERRY 793 FLOWING WALL RD		6.2 NAME	4000500	Butler, Terry
STREET ADDRESS	WAGENER SC		6.3 STREET	ADURESS	793 Flowing Well Rd.
14. hereby c	ertify that the information supplied wi	th this filing does not qualify for	the exemp	tion state	Wagener SC 20164 and in Section 119.07(3)(i), Florida Statutes, Ffurther certify that the information
Indicated on this annual report or supplemental annual epol is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an afficer or director of the corporation or the receiver or trolled employered to execute this report as required by Chanter 617. Florida Statutes, and that my game appears in					
WAGENER SC 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. 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 trailed empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 of changes or an attachment with an address.					