

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000001942 (0)

1. Corporation Name

ZOE MINISTRIES WORLDWIDE, INC.

Principal Place of Business

1651 NE 115TH ST., #32C
NORTH MIAMI FL 33181

Mailing Address

P.O. BOX 611342
NORTH MIAMI FL 33261



3. Date Incorporated or Qualified
04/20/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26 3208 C. East Colonial Dr

Suite, Apt. #, etc.

27

City & State

28 Orlando, FL

29

Zip

Country

30 USA

4. FEI Number
650581784

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

9. Name and Address of Current Registered Agent

PRICE, D.J. DR.
1500 NE 127TH ST. #101
MIAMI FL 33161

10. Name and Address of New Registered Agent

81 Name

Theodore Nwanne

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

3208 C. East Colonial Drive

83

84 City

Orlando

FL

85 Zip Code
32803

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

Theodore Nwanne

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE

04/29/96

12. OFFICERS AND DIRECTORS

TITLE

D

☒ DELETE

NAME

PRICE, DAVID J DR.
1500 NE 127TH ST. #101
MIAMI FL 33161

STREET ADDRESS

CITY-ST-ZIP

TITLE

D

☒ DELETE

NAME

PRICE, AMY I REV.
1500 NE 127TH ST. #101
MIAMI FL 33161

STREET ADDRESS

CITY-ST-ZIP

TITLE

D

☒ DELETE

NAME

PRICE, KATHLEEN R
373 #111 PRINCETON AVE., OTTAWA
ONTARIO, CANADA K2A-4E1

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

D

☐ Change

☒ Addition

1.2 NAME

Theodore Nwanne

1.3 STREET ADDRESS

3208 C. East Colonial Dr.
Orlando, FL 32803

1.4 CITY-ST-ZIP

2.1 TITLE

P/D

☐ Change

☒ Addition

2.2 NAME

Patrick Anwuzia

2.3 STREET ADDRESS

Unit 24, Eurolink Bus. Centre,
49 Effra Rd, Brixton, London SW21BZ

2.4 CITY-ST-ZIP

3.1 TITLE

V/D

☐ Change

☒ Addition

3.2 NAME

Clement Animashonu

3.3 STREET ADDRESS

8800 Bissonnet

3.4 CITY-ST-ZIP

Houston, TX 77074

4.1 TITLE

S/B

☐ Change

☒ Addition

4.2 NAME

Sharyn Elander

4.3 STREET ADDRESS

2200 Rockwood
Carrollton, TX 75007

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

500001840835

5.3 STREET ADDRESS

-05/28/96--01034--005

5.4 CITY-ST-ZIP

***8.75

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

600001840836

6.3 STREET ADDRESS

-05/28/96--01034--006

6.4 CITY-ST-ZIP

***61.25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/96

214 484-7728

Daytime Phone #

CR2E037 (12/95)