


FILE NOW: FILING FEE IS \$61.25

FILED
May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000004039 (2)**

1. Corporation Name

LARRY MASSEY CHRISTIAN MINISTRIES, INC.



Principal Place of Business RT 2 BOX 240 MAYO FL 32066 US	Mailing Address RT 2 BOX 240 MAYO FL 32066 US
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3. Date Incorporated or Qualified 08/22/1995
4. FEI Number 59-3353297
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 17595 SE 95 ST RD Suite, Apt. #, etc. 22 Ocklawaha, FL City & State 23 Zip 24 32179 Country 25 Marion	2a. Mailing Address 26 17595 SE 95 ST RD Suite, Apt. #, etc. 27 City & State 28 Ocklawaha, FL Zip 29 32179 Country 30 Marion
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent MUTCH, SAMUEL A US 27 AND SR 51 MAYO FL 32066	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASSEY, LARRY	1.2 NAME	
STREET ADDRESS	RT 2 BOX 240	1.3 STREET ADDRESS	17595 SE 95 ST RD
CITY-ST-ZIP	MAYO FL	1.4 CITY-ST-ZIP	Ocklawaha, FL 32179
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASSEY, BETTY	2.2 NAME	
STREET ADDRESS	RT 2 BOX 240	2.3 STREET ADDRESS	17595 SE 95 ST RD
CITY-ST-ZIP	MAYO FL	2.4 CITY-ST-ZIP	Ocklawaha, FL 32179
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALKER, TIM	3.2 NAME	
STREET ADDRESS	RT. 2 BOX 319	3.3 STREET ADDRESS	
CITY-ST-ZIP	MAYO FL 32066	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: **LARRY MASSEY** **BETTY MASSEY** **JUN 3 1998** **352-200-3322**

CP2E037 (10/97)