

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000004412 (1)

1. Corporation Name

LUGO MINISTRIES INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

100 B VERSAILLES DR
MELBOURNE BEACH FL 32951

100 B VERSAILLES DR
MELBOURNE BEACH FL 32951

3. Date Incorporated or Qualified
09/13/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 328 Myrtlewood Rd.

26 P.O. Box 411044

4. FEI Number

59-3335048

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

City & State

23 Melbourne, FL

City & State

28 Melbourne, FL

24 Zip

32940

Country

25 Brevard

Zip

29 32941

Country

30 Brevard

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LUGO, JULIA A
100 B VERSAILLES DR
MELBOURNE BEACH FL 32951

81 Name Juli Anne Lugo

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

328 Myrtlewood Rd.

83

84 City Melbourne

FL

85 Zip Code 32940

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, 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)

2/10/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME LUGO, JAIME JR
STREET ADDRESS 100 B VERSAILLES DR
CITY-ST-ZIP MELBOURNE BEACH FL 32951 ☐ DELETE

1.1 TITLE D
1.2 NAME Juli Anne Lugo
1.3 STREET ADDRESS 328 Myrtlewood Rd
1.4 CITY-ST-ZIP Melbourne, FL 32940 ☐ Change ☐ Addition

TITLE D
NAME LUGO, JULIA A
STREET ADDRESS 100 B VERSAILLES DR
CITY-ST-ZIP MELBOURNE BEACH FL 32951 ☐ DELETE

2.1 TITLE D
2.2 NAME JAIME LUGO, JR
2.3 STREET ADDRESS 328 Myrtlewood Rd
2.4 CITY-ST-ZIP Melbourne, FL 32940 ☐ Change ☐ Addition

TITLE D
NAME SPITLER, JANET
STREET ADDRESS 3051 ROBERTSON RD
CITY-ST-ZIP GROVESPRING MO 65662 ☐ DELETE

3.1 TITLE D
3.2 NAME JANET SPITLER
3.3 STREET ADDRESS 3051 Robertson Rd.
3.4 CITY-ST-ZIP Grovespring, Mo. 65662 ☐ Change ☐ Addition

TITLE ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
800001784828
-04/18/96--01010--001
***70.00 ☐ Change ☐ Addition

TITLE ☐ DELETE

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

TITLE ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)