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Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N96000001733 (2)  
1. Corporation Name

RHEMA GOSPEL FELLOWSHIP MINISTRIES INC.

Principal Place of Business

Mailing Address

26271 S.W. 132ND PLACE  
PRINCETON FL 33032

PO BOX 92448  
PRINCETON FL 33092

3. Date Incorporated or Qualified  
03/25/1996

3a. Date of Last Report  
3/25/94

2. Principal Place of Business

21 10701 SW 266 street

Suite, Apt. #, etc.

22 Suite # 11

23 City & State  
Goulds Florida

24 Zip  
33170

Country

25 D USA

9. Name and Address of Current Registered Agent

BROWNE, JOANN  
26271 S.W. 132ND PLACE  
PRINCETON FL 33032

2a. Mailing Address

26 P.O. Box 92448

Suite, Apt. #, etc.

27 City & State  
Princeton Fla.

28 Zip  
33092

Country  
USA

4. FEI Number

65-065 6061

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

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 JoAnn Browne director

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

JoAnn Browne

May 1, 1997

12. OFFICERS AND DIRECTORS

TITLE Director

NAME Barbara Harkins  
STREET ADDRESS 13360 SW 266 street  
CITY-ST-ZIP Naranja, Fla. 33032

TITLE Trustee

NAME Pamela Baxter  
STREET ADDRESS 10425 SW 288 st.  
CITY-ST-ZIP Homestead, Fla. 33033

TITLE Trustee

NAME Althease Way  
STREET ADDRESS 10960 SW 217 st.  
CITY-ST-ZIP Miami, Fla. 33170

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director

1.2 NAME JoAnn Browne  
1.3 STREET ADDRESS 26271 SW 132 place  
1.4 CITY-ST-ZIP Princeton, Florida 33032

2.1 TITLE

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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.

CP2E037 (9/96)