

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED), MINIMUM AMOUNT DUE TO REINSTATE: \$236.25)

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N96000001765 (4)

1. Corporation Name

SERVING JESUS IN MISSIONS, INC.

Principal Place of Business

5435 DEEPPDALE DRIVE
ORLANDO FL 32821

Mailing Address

5435 DEEPPDALE DRIVE
ORLANDO FL 32821

2 Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9 Name and Address of Current Registered Agent

COLEMAN, SHAUNA L
5435 DEEPPDALE DRIVE
ORLANDO FL 32821

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE [] DELETE

1.2 NAME COLEMAN, SHAUNA L

1.3 STREET ADDRESS 5435 DEEPPDALE DRIVE

1.4 CITY-STATE-ZIP ORLANDO FL 32821

2.1 TITLE [] DELETE

2.2 NAME COLEMAN, LANA S

2.3 STREET ADDRESS 5435 DEEPPDALE DRIVE

2.4 CITY-STATE-ZIP ORLANDO FL 32821

3.1 TITLE [X] DELETE

3.2 NAME ROGERS, DOROTHY J

3.3 STREET ADDRESS 53 MARLETTE DRIVE

3.4 CITY-STATE-ZIP MILTON FL 32570

4.1 TITLE [] DELETE

4.2 NAME COLEMAN, CARL F

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5.100 CITY-STATE-ZIP

SIGNATURE:

Shauna L. Coleman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Oct 08 1998 8:00am
Secretary of State



3. Date Incorporated or Qualified

04/02/1996

4. FEI Number

59-3458770

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

7. Is this nonprofit corporation a homeowners association?

[] Yes [X] No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. [] Yes [X] No

10. Name and Address of New Registered Agent

81 Name

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

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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.

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SIGNATURE:

Shauna L. Coleman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/98

Date

407