

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 03 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000003196 (0)

1. Corporation Name

WITH ONE ACCORD MINISTRIES INC.

Principal Place of Business

255 LUCAS ROAD
F 425
MERRITT ISLAND FL 32963

Mailing Address

PO BOX 3243
COCOA FL 32924-3243



3. Date Incorporated or Qualified
06/13/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-3308985

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

10. Name and Address of New Registered Agent

JONES, WILBERT SR
255 LUCAS ROAD
F 425
MERRITT ISLAND FL 32963

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

TITLE	D	DELETE
NAME	JONES, DOROTHY	
STREET ADDRESS	255 LUCAS ROAD, F425	
CITY-ST-ZIP	MERRITT ISLAND FL 32963	
TITLE	D	DELETE
NAME	JONES, WILBERT	
STREET ADDRESS	255 LUCAS ROAD, F425	
CITY-ST-ZIP	MERRITT ISLAND FL 32963	
TITLE	D	DELETE
NAME	CLARK, JOHNNIE L	
STREET ADDRESS	500 N HARBOR BLVD-D	
CITY-ST-ZIP	MELBOURNE FL 32901	
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	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME	Jenkins, Robert	
3.3 STREET ADDRESS	1025 Bevis Road	
3.4 CITY-ST-ZIP	Merritt Island, FL 32953	
4.1 TITLE	Change	Addition
4.2 NAME	Ross, Vontinese	
4.3 STREET ADDRESS	2928 Shepard Drive	
4.4 CITY-ST-ZIP	Rockledge, FL 32955	
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
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.

SIGNATURE: Dorothy Jones, Dorothy Jones

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 28, 1997 (407)
452-3169

Date Daytime Phone # 0019074

CR2E037 (9/96)