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NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

Jun 04 1998 8:00am
Secretary of State

DOCUMENT # N96000004225 (6)

1. Corporation Name

BY HIS GRACE CHRISTIAN MINISTRIES, INC.

Principal Place of Business

Mailing Address

5301 LUCI CT
#124
TAMPA FL 33617
US

P.O BOX 82279
TAMPA FL 33682
US

3. Date Incorporated or Qualified

08/13/1996

4. FEI Number

59-3396382

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 4203 Kenneth Ct

26 P.O. 17303

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #1-203

27

City & State

City & State

23 Tampa, FL

28 Tampa, FL

Zip

Country

Zip

Country

24 33610

25 Hillsborough

29 33682

30 Hillsborough

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KING, QUENTIN
4509 10TH AVENUE NORTH
ST. PETERSBURG FL 33712

81 Name King, Quentin

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

P.O. Box 17303

83 4203 KENNETH CT #1-203

84 City Tampa

FL

85 Zip Code

33682

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 QUENTIN KING

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4-28-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

1.1 TITLE PD ☒ Change ☐ Addition

NAME KING, QUENTIN
STREET ADDRESS 5301 LUCI CT., #124
CITY-ST-ZIP TAMPA FL

1.2 NAME King, Quentin
1.3 STREET ADDRESS 4203 Kenneth Ct #1-203
1.4 CITY-ST-ZIP Tampa, FL 33610

TITLE SD ☐ DELETE

2.1 TITLE SD ☒ Change ☐ Addition

NAME KING, FREDIA
STREET ADDRESS 5301 LUCI CT., #124
CITY-ST-ZIP TAMPA FL

2.2 NAME King, Fredia
2.3 STREET ADDRESS 4203 Kenneth Ct #1-203
2.4 CITY-ST-ZIP Tampa, FL 33610

TITLE TD ☐ DELETE

3.1 TITLE TD ☒ Change ☐ Addition

NAME KING, FREDIA
STREET ADDRESS 5301 LUCI CT., #124
CITY-ST-ZIP TAMPA FL

3.2 NAME King, Fredia
3.3 STREET ADDRESS 4203 Kenneth Ct #1-203
3.4 CITY-ST-ZIP Tampa, FL 33610

TITLE D ☒ DELETE

4.1 TITLE D ☒ Change ☐ Addition

NAME WANDA, BEAL
STREET ADDRESS 203 W IDA ST
CITY-ST-ZIP TAMPA FL

4.2 NAME King, Juan
4.3 STREET ADDRESS 4203 Kenneth Ct #1-203
4.4 CITY-ST-ZIP Tampa, FL 33610

TITLE D ☐ DELETE

5.1 TITLE D ☒ Change ☐ Addition

NAME KING, JUAN
STREET ADDRESS 5301 LUCI CT., #124
CITY-ST-ZIP TAMPA FL

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ 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

QUENTIN KING 4-28-98

CR2E037 (10/97)