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FILED

May 20 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004280 (1)

1. Corporation Name

MY HOUSE MINISTRIES INC.

Principal Place of Business

Mailing Address

1110 WINDSOR HILL WAY
TARPON SPRINGS FL 346891110 WINDSOR HILL WAY
TARPON SPRINGS FL 34689-3068

2. Principal Place of Business

2a. Mailing Address

21 58 Lexington Court

26 58 Lexington Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Palm Harbor, Fl.

28 Palm Harbor, Fl.

Zip

Country

Zip

Country

24 34684

25 Pinellas

29 34684

30 Pinellas

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/15/1996

3a. Date of Last Report

4. FEI Number

☒ Applied For☐ Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

BILLY, BARBARA G
1110 WINDSOR HILL WAY
TARPON SPRINGS FL 34689*(Same agent
New address)* →

81 Name

Barbara G. Billy

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

58 Lexington Court

83

84 City

Palm Harbor,

85

Zip Code

FL

34684

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 *Barbara G. Billy*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-18-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP1.1 TITLE ☒ Change ☐ Addition
1.2 NAME Rev. Fred C. Billy (Address)
1.3 STREET ADDRESS 58 Lexington Court
1.4 CITY-ST-ZIP Palm Harbor, Fl 34684TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Barbara G. Billy (Address)
2.3 STREET ADDRESS 58 Lexington Court
2.4 CITY-ST-ZIP Palm Harbor, Fl. 34684TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME Reverend Alf O. Kavli
3.3 STREET ADDRESS 10324 Rainbridge Dr
3.4 CITY-ST-ZIP Riverview, Fl. 33569TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 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:

Typed and printed name of signing officer or director

4-18-97

Date

813-784-8891

Daytime Phone #

CR2E037 (9/96)