FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 30 1998 8:00am Secretary of State

1. Corporation Name											
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RON BOWLUS MINISTRIES, INC.								i 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ia seria della del	181 al de l 1869	\$0.001 HOT 1004
Principal Place of Business Mailing Address								-	il Ba lli Gr ill Ba	ill affor lifeit	ABBOR HOU EURH
801 WEST 124TH AVENUE 801 WEST 124TH AVENUE											
801 WEST 124TH AVENUE 801 WEST 124TH AVENUE TAMPA FL 33612 TAMPA FL 33612								3. Date Incorporated or Qualifie	d		
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1								08/21/1996		- (- (- (- (- (- (- (- (- (- (
								4. FEI Number			Applied For
2. Principal Place of Business				2a. Mailing Address			<u>59-3407095</u>			Not Applicable	
21				26				5. Certificate of Status Desired			Additional Required
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.				6. Election Campaign Financing			May Be
22			27					Trust Fund Contribution			to Fees
City & State	9			City & State				7. is this nonprofit corporation a homeowners association?			
Zip				Zip Cou							
24	25		<u> </u>	29 30		Country		This corporation owes of has Personal Property Tax due Ju			ntangible No
24	9. Name and Address of Current Re						10. Name and Address of New Registered Agent				
The state of the s											
GRAVES, JOSEPH H						Street	Addro	co (P.O. Boy Number is Not Accen	table)		
135 EAST LEMON STREET					82	Street	Address (P.O. Box Number is Not Acceptable)				
TARPON SPRINGS FL 34689											
						City			FI	85 Zip	Code
11. Pursuant t	to the provisio	os of Sections 617.0	0502 and 617.150	8. Florida Statut	es, the above	l e-named	corpo	ration submits this statement for the		changing	its registered
office or re	egistered age	nt, or both, in the St	ate of Florida, Su	ch change was a	authorized by	y the corp	ooratio	ration submits this statement for th n's board of directors. I hereby acc	cept the app	ointment a	s registered
SIGNATURE _	in ranning tim	, and accept the ce	inguitation, cook	, g	onica otatata	.					
	Signature, typed o	r printed name of registered	agent and title if applic	able. (NOT	E: Registered Ag	ent signature	required	d when reinstating)	DATE		
12.				ND DIRECTORS 13.				ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	PD	DOM		☐ DELETE 1,1 T			ŀ			Change	Addition
NAME	BOWLUS,			1.2 h							
STREET ADDRESS	801 W 12			1.33							
CITY-ST-ZIP TITLE	TAMPA F	<u> </u>		1.4 C			75.	TRREET SPILLIN	9	24 Change	Addition
NAME					2.2 NAME	\	3	WLUS, DREDUKT		Les unango	
STREET ADDRESS								532 LUCKRARY			
CITY-ST-ZIP	JACKSONVILLE FL			2.40			7	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ļ
TITLE	SD DELETE				3,1 TITLE	31-21	 			Change	Addition
NAME	DOWN NO DOLLAR				3.2 NAME						
STREET ADDRESS	664 HZ 164711 H M				3.3 STREET	ADDRESS					
CITY-SY-ZIP	TANDA EL					ST-ZIP					
TITLE				DELETE	4.1 TITLE					Change	Addition
NAME					4. 2 NAME						
STREET ADDRESS	4.3 \$					ADDRESS					
CITY-ST-ZIP					4.4 CITY-5	ST-ZIP	<u></u>				
TITLE				DELETE	5.1 TITLE					Change	Addition
NAME (5.2 NAME						l
STREET ADDRESS				5.3 STREET	5.3 STREET ADDRESS						
CITY-ST-ZIP					5.4 CITY - 9	ST-ZIP	<u> </u>			I Observe	A 4410
TITLE				☐ DELETE	6.1 TITLE]			L Change	Addition
NAME					6.2 NAME						
Street address					6.3 STREET						•
CITY-ST-ZIP	and the state of	toform attendance allow	4	analif. f	6.4 CITY - S		1	action 110 07(2)(i) Florida Statutos	I further as	aff. that th	a Vistarina Van

Florida Statutes. I further certify that the information is legal effect as if made under oath; that I am an , Florida Statutes; and that my name appears in