

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 13 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N96000006080 (3)**  
1. Corporation Name  
**JESUS PEOPLE LIFE CHANGING MINISTRIES CHURCH, INC.**



Principal Place of Business <b>2630 NW 41ST STREET STE D-1 GAINESVILLE FL 32606 US</b>	Mailing Address <b>2630 NW 41ST STREET STE D-1 GAINESVILLE FL 32606 US</b>
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3. Date Incorporated or Qualified <b>11/22/1996</b>		
4. FEI Number <b>59-3415126</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 <b>125 NW 23rd Avenue</b> Suite, Apt. #, etc. 22 <b>Gainesville Florida</b> City & State 23 24 Zip <b>32604</b> 25 Country <b>Alachua</b>	2a. Mailing Address 26 <b>215 NW 23rd Avenue</b> Suite, Apt. #, etc. 27 28 <b>Gainesville, Florida</b> City & State 29 Zip <b>32604</b> 30 Country <b>Alachua</b>
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9. Name and Address of Current Registered Agent  
**MINGO, HORACE L  
10166 SW 52ND ROAD  
GAINESVILLE FL 32608**

10. Name and Address of New Registered Agent  
81 Name **Horace L. Mingo**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**3920 NW 95th Blvd.**  
83  
84 City **Gainesville** FL 85 Zip Code **32609**

11. Pursuant to the provisions of Sections 617.01(2) and 617.15(8), 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 617.05(3), Florida Statutes.  
SIGNATURE: *Horace Mingo* DATE: **2-5-98**  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	<b>PD</b>	
NAME	<b>MINGO, HORACE L</b>	
STREET ADDRESS	<b>10166 SW 52ND ROAD</b>	
CITY-ST-ZIP	<b>GAINESVILLE FL 32608</b>	
TITLE	<b>VD</b>	
NAME	<b>MINGO, LURETHA M</b>	
STREET ADDRESS	<b>10166 SW 52ND ROAD</b>	
CITY-ST-ZIP	<b>GAINESVILLE FL 32608</b>	
TITLE	<b>TD</b>	
NAME	<b>WILLIAMS, ISIAH S JR.</b>	
STREET ADDRESS	<b>16206 NW 83RD COURT</b>	
CITY-ST-ZIP	<b>MIAMI FL 33016</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE	<b>PD</b>		
1.2 NAME	<b>Mingo, Horace L</b>		
1.3 STREET ADDRESS	<b>3920 NW 95th BLVD</b>		
1.4 CITY-ST-ZIP	<b>Gainesville FL 32609</b>		
2.1 TITLE	<b>VD</b>		
2.2 NAME	<b>Mingo, Luretha M</b>		
2.3 STREET ADDRESS	<b>3920 NW 95th BLVD</b>		
2.4 CITY-ST-ZIP	<b>Gainesville, FL 32609</b>		
3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME			
6.3 STREET ADDRESS			
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: *Horace Mingo* DATE: **2-5-98**

CR2E037 (10/97)