


FILE NOW: FILING FEE IS \$61.25

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Mar 03 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 # **N97000000086 (5)**

1. Corporation Name  
**STEADMAN BENT MINISTRIES, INC.**



Principal Place of Business <b>226 PARK AVENUE LAKE PARK FL 33403</b>	Mailing Address <b>226 PARK AVENUE LAKE PARK FL 33403</b>
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3. Date Incorporated or Qualified <b>01/02/1997</b>	4. FEI Number <b>31-1504049</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
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2. Principal Place of Business <b>21 4711 Lakeside Circle</b> Suite, Apt. #, etc. <b>22</b>	2a. Mailing Address <b>26 4711 Lakeside Circle</b> Suite, Apt. #, etc. <b>27</b>
City & State <b>23 West Palm Beach, FL</b> Zip <b>24 33417</b>	City & State <b>26 West Palm Beach, FL</b> Zip <b>29 33417</b>
Country <b>25 USA</b>	Country <b>30 USA</b>

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 checked="" 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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>BENT, STEADMAN 226 PARK AVENUE LAKE PARK FL 33403</b>
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10. Name and Address of New Registered Agent <b>81 Name BENT, STEADMAN</b> <b>82 Street Address (P.O. Box Number is Not Acceptable) 4711 Lakeside Circle</b> <b>83 West Palm Beach, FL 33417</b> <b>84 City FL</b> <b>85 Zip Code</b>
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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 <b>BENT, STEADMAN</b> <i>[Signature]</i> <b>1-29-98</b> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE
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12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BENT, STEADMAN 226 PARK AVENUE LAKE PARK FL 33403 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ROBINSON, RHONDA 7713 EMBASSY BLVD MIRAMAR FL 33023 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BENT, TAMAR 226 PARK AVENUE LAKE PARK FL 33403 <input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD BENT, STEADMAN 4711 Lakeside Circle, West Palm Beach, FL 33417 <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TD BENT, TAMAR 33417 Lakeside Circle, W.P.B. 33417 <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.
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SIGNATURE: <i>[Signature]</i> <b>BENT, STEADMAN</b> <b>1-29-98</b> <b>(561) 687-3166</b> <b>(561) 832-1363</b>
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CR2E037 (10/97)