

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

DOCUMENT # **N97000000461 (0)**

1. Corporation Name

**DIETZ MINISTRIES, INC.**



Principal Place of Business

Mailing Address

7178 WESTWOOD WAY  
SARASOTA FL 34241

7178 WESTWOOD WAY  
SARASOTA FL 34241

3. Date Incorporated or Qualified

**01/22/1997**

4. FEI Number

**65-0739368**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00** May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

21 **5812 Bee Ridge Rd**

Suite, Apt. #, etc.

City & State

23 **SARASOTA FL**

Zip

**34233**

Country

**SARASOTA**

2a. Mailing Address

26 **Same**

Suite, Apt. #, etc.

City & State

27 **Same**

Zip

**34233**

Country

**USA**

9. Name and Address of Current Registered Agent

**DIETZ, EDWARD R JR**  
7178 WESTWOOD WAY  
SARASOTA FL 34241

10. Name and Address of New Registered Agent

81 Name

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

**7402 Weeping Willow Dr.**

84 City **SARASOTA**

FL

85 Zip Code **34241**

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 **Edward R Dietz Jr president**

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**7-9-98**

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **DIETZ, EDWARD R JR**  
STREET ADDRESS **7178 WESTWOOD WAY**  
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **D** ☐ DELETE

NAME **DIETZ, LUCY Q**  
STREET ADDRESS **7178 WESTWOOD WAY**  
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **D** ☐ DELETE

NAME **LONGOBARDI, EDWARD**  
STREET ADDRESS **2701 MONTEREY ST.**  
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **D** ☒ DELETE

NAME **FEDERICO, JOSEPH A**  
STREET ADDRESS **5707 45TH ST EAST #49**  
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **D** ☒ DELETE

NAME **FEDERICO, VERONICA A**  
STREET ADDRESS **5707 45TH ST EAST #49**  
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **D** ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS **7402 Weeping Willow Dr.**  
1.4 CITY-ST-ZIP **SARASOTA FL 34233**

2.1 TITLE **D** ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS **7402 Weeping Willow Dr.**  
2.4 CITY-ST-ZIP **SARASOTA FL 34233**

3.1 TITLE **D** ☐ Change ☒ Addition

3.2 NAME  
3.3 STREET ADDRESS **JAMES CIRELLO**  
**4481 Eleuthera Ct.**  
**SARASOTA FL 34233**

4.1 TITLE **D** ☐ Change ☒ Addition

4.2 NAME  
4.3 STREET ADDRESS **DANIEL HEUSTON**  
**3961 Almond Ave**  
**SARASOTA FL 34234**

5.1 TITLE **D** ☒ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS **LONGOBARDI, EDWARD**  
**2701 Monterey St.**  
**SARASOTA FL 34231**

6.1 TITLE ☐ Change ☐ 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: **Edward R Dietz Jr president**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-9-98 941-342-6500**

Date Daytime Phone #

CR2E037 (5/98)

0010804