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

FILED
Oct 08 1998 8:00am
Secretary of State

DOCUMENT # N97000000945 (2)

1. Corporation Name

ROGER C. COLLINS EVANGELISTIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2231 SANTIAGO AVENUE FORT MYERS FL 33905	2231 SANTIAGO AVENUE FORT MYERS FL 33905

3. Date Incorporated or Qualified: 02/17/1997

4. FEI Number: 59-3347115 [ ] 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 [X] No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [X] Yes [ ] No

2. Principal Place of Business	2a. Mailing Address
21 2607 E. Cypress Avenue	26 P.O. Box 4141
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Fort Myers, Florida	28 City & State: N. Fort Myers, FL
24 Zip: 33905 25 Country: USA	29 Zip: 33918 30 Country: USA

9. Name and Address of Current Registered Agent

COLLINS, ROGER C
2231 SANTIAGO AVENUE
FORT MYERS FL 33905

10. Name and Address of New Registered Agent

81 Name: Kelly J. Cook
82 Street Address (P.O. Box Number is Not Acceptable): 2607 E. Cypress Avenue
83
84 City: Ft. Myers FL 85 Zip Code: 33905

11. Pursuant to the provisions of sections 617.0501 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: Kelly J. Cook DATE: 9-10-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	[ ] DELETE	1.1 TITLE	[X] Change [ ] Addition
NAME	COLLINS, ROGER C		1.2 NAME	
STREET ADDRESS	2231 SANTIAGO AVENUE		1.3 STREET ADDRESS	Post Office Box 4141 N/A
CITY-ST-ZIP	FORT MYERS FL 33905		1.4 CITY-ST-ZIP	N. Ft. Myers, FL 33918
TITLE	D	[ ] DELETE	2.1 TITLE	[ ] Change [ ] Addition
NAME	LARKIN, CHARLES L		2.2 NAME	
STREET ADDRESS	2325 DAVIS BOULEVARD		2.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL 33905		2.4 CITY-ST-ZIP	
TITLE	D	[X] DELETE	3.1 TITLE	[ ] Change [ ] Addition
NAME	BARBAR, WILLIAM H		3.2 NAME	
STREET ADDRESS	3838 WASHINGTON AVENUE		3.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL 33916		3.4 CITY-ST-ZIP	
TITLE	D	[X] DELETE	4.1 TITLE	[ ] Change [ ] Addition
NAME	TOLLISON, JAMES		4.2 NAME	
STREET ADDRESS	2953 RAIN DANCER NORTH		4.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH FORT MYERS FL 33917		4.4 CITY-ST-ZIP	
TITLE		[ ] DELETE	5.1 TITLE	D [ ] Change [X] Addition
NAME			5.2 NAME	Vernon Mann
STREET ADDRESS			5.3 STREET ADDRESS	4905 N. Maryvale
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Tucson, AZ 85705
TITLE		[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E037 (5/98)

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 receivor 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: Roger C. Collins, Jr. 9-10-98 941-693-8435
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #