


FILE NOW: FILING FEE IS \$61.25

FILED
Jan 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000001961 (8)

1. Corporation Name

LOIS ROBERTS MINISTRIES, INC.



Principal Place of Business	Mailing Address
7808 GREEN RD LAKELAND FL 33810	7808 GREEN RD LAKELAND FL 33810

3. Date Incorporated or Qualified
04/08/1997

4. FEI Number	Applied For
59-344-0923	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Lakeland FL	26 7808 Green Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 7808 Green Rd	27
City & State	City & State
23 Lakeland FL	28 Lakeland FL
Zip	Country
24 33810	25 POH
29 33810	30 POH

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

9. Name and Address of Current Registered Agent

ROBERTS, LOIS
7808 GREEN RD
LAKELAND FL 33810

10. Name and Address of New Registered Agent

81 Name **NONE**

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

83

84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERTS, LOIS	1.2 NAME	
STREET ADDRESS	7808 GREEN RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33810	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIBLER, CLAIRECE	2.2 NAME	CLAIRECE SCROGGINS
STREET ADDRESS	3295 HORSEHOE TRAIL	2.3 STREET ADDRESS	486 NORTH PIN OAK PLACE
CITY-ST-ZIP	TALLAHASSEE FL 32313-5065	2.4 CITY-ST-ZIP	SUITE 100 - HUNTERWOOD EN. 32739
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERTS, DAVID L	3.2 NAME	
STREET ADDRESS	5555 FIELDING LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34230	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Lois Roberts* **LOIS ROBERTS** **SECRETARY** **FILED** **Jan-6-98-941-815-2495**

CR2E037 (10/97)