

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**

**Feb 02, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # N97000002853**

1. Entity Name

**PEOPLE HELPING PEOPLE OUTREACH EVANGLISM  
MINISTRIES/MISSION INC.**



Principal Place of Business

**8101 N.W. 22 AVE.  
MIAMI FL 33142**

Mailing Address

**2350 N.W. 54 ST.  
705  
MIAMI FL 33142**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-0758531**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRANCE, ANDRE R  
2350 N.W. 54 ST., #705  
MIAMI FL 33142**

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME FRANCE, ANDRE R ☐ Delete  
STREET ADDRESS 2350 N.W. 54 ST., #705  
CITY-ST-ZIP MIAMI FL 33142

TITLE VD  
NAME FRANCE, THELMA E ☐ Delete  
STREET ADDRESS 1255 N.E. 135 ST.  
CITY-ST-ZIP N. MIAMI FL 33168

TITLE S  
NAME GIBSON, ALISSA K ☐ Delete  
STREET ADDRESS 1091 NW 7TH CT. #202  
CITY-ST-ZIP MIAMI FL 33136

TITLE C  
NAME COOLEY, REBECCA ☐ Delete  
STREET ADDRESS 536 SW 4TH STREET, #10  
CITY-ST-ZIP MIAMI FL 33130

TITLE T  
NAME COOLEY, LUCILLE ☐ Delete  
STREET ADDRESS 536 SW 4TH ST., #10  
CITY-ST-ZIP MIAMI FL 33130

TITLE T  
NAME BENTLEY, MARY L ☐ Delete  
STREET ADDRESS 301 NW 22ND ST., #203  
CITY-ST-ZIP MIAMI FL 33127

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS U00000029696  
CITY-ST-ZIP 02/04/04-80076-013 61.25

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Andre R France*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1.30.04 1305/634.7683**