NONPROFIT CORPORATION ANNUAL REPORT

- 3



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Mar 02, 1999 8:00 am § Secretary of State 03-02-1999 90176 008 ****61.25

	1999	5	RPORATIONS	03-02-1999	90176 008 **** 61.23
1. Corporation		005070		,	
THE JESUS WAY INC.				150371 90176 8	
Drivation I Otace	af Duainana	Mailing Address		<u> </u>	
				1 100/100 BIG (BIS) 18BH 88HH 8	ALIE BAIEL AAKL ABIAL BEKL ABUL JAAL BAIL IARI
1811 SE 48TH ST. 1811 SE 48TH ST. OCALA FL 34480 OCALA FL 34480					
					0111 00111 60111 60111 0610 Finit 00111 10011 10011 10011
2 Dringing D	long of Business	2a. Mailing Address		Date incorporated or Qualife	d
		26		09/08/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	- 1		Applied For
22		27		65-0782419	- Not Applicable
City & State	9	City & State		5. Certifcate of Status Desired	\$8.75 Additional
23		28			Fee Required
Zip	Country	Zip 29 3	Country	Election Campaign Financing Trust Fund Contribution	g \$5.00 May Be Added to Fees
24	9. Name and Address of Curren		01	10. Name and Address of New	
	V. Humo and Address of Garden		81 Name 🛔	T	-
STEWART	, NANCY L		82 Street A	ddress (P.O. Box Number is Not Acce	stable) Survivors Constitution
1411 BOR			181	Fern Lane	(# 146 %) 5 % \$ % (\$ 14 mm - 2 mm H)
	SPRINGS FL 32708		83		·····
			84 City		85 Zip Code
			101	tona	FL 85 Zip Code 32708
Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	, the above-named o	orporation submits this statement for the	ne purpose of changing its registered
office or re	edistered adent, or both, in the State	of Florida. Such change was a⊔tl	horized by the corpor	ation's board of directors. I hereby acc	ept the appointment as registered
office or re agent. I a	m familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 617.0503, Florid	horized by the corpor la Statutes. 🏓	ation's board of directors. I hereby acc	ne purpose of changing its registered sept the appointment as registered
office or re agent. I as	TI ancu X. S	lewar _	•		Pept the appointment as registered Jan 17, 1999 DATE
	Signature, typed or printed name of registered ager	lewar _	horized by the corporal Statutes.	uired when reinstating)	DATE DEFICERS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: R	egistered Agent algnature req	uired when reinstating)	Jan. 11, 1777
SIGNATURE	Skgripture, typed or printing name of registered ager OFFICERS AN	THE AND THE PROPERTY OF THE PR	egistered Agent signature req	uired when reinstating)	DATE OFFICERS AND DIRECTORS IN 12
SIGNATURE 12.	Signature, typed or printed name of registered ager OFFICERS AND	THE AND THE PROPERTY OF THE PR	egistered Agent signature req 13.	uired when reinstating)	DATE OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480	All and title if applicable. (NOTE: R) ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP	uired when reinstating)	DATE DEFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or pringed name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP	THE AND THE PROPERTY OF THE PR	13. 1.1 YITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	uired when reinstating)	DATE OFFICERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or pringed name of registered ager OFFICERS AND D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS	All and title if applicable. (NOTE: R) ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	uired when reinstating)	DATE DEFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or pringer name of registered ager OFFICERS AND D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST.	All and title if applicable. (NOTE: R) ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	uired when reinstating)	DATE DEFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or pringename of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480	nt and title if applicable. (NOTE: RID DIRECTORS DELETE	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	uired when reinstating)	DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or pringename of registered ager OFFICERS AND D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT	All and title if applicable. (NOTE: R) ID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	uired when reinstating)	DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or pringename of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE	nt and title if applicable. (NOTE: RID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	uired when reinstating)	DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or pring name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST.	nt and title if applicable. (NOTE: RID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	uired when reinstating)	DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or pringename of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE	nt and title if applicable. (NOTE: RID DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired when reinstating)	DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or pring name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST.	nl and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	uired when reinstating)	DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or pring name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST. OCALA FL 34480 T	nl and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	uired when reinstating)	DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or pringe name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN	n and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	uired when reinstating)	DATE DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	Signature, typed or pring name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN 7700 S LEWIS AVE. TULSA OK 74136 T	nl and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	uired when reinstating)	DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN 7700 S LEWIS AVE. TULSA OK 74136 T RUGGLES, BRIAN	n and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired when reinstating)	DATE DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, TVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN 7700 S LEWIS AVE. TULSA OK 74136 T RUGGLES, BRIAN 2135 E 139TH ST.	n and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	uired when reinstating)	DATE DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN 7700 S LEWIS AVE. TULSA OK 74136 T RUGGLES, BRIAN	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired when reinstating)	DATE DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Signaura, typed or pring name of registered ager OFFICERS AN D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, YVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN 7700 S LEWIS AVE. TULSA OK 74136 T RUGGLES, BRIAN 2135 E 139TH ST. BIXBY OK 74008 T	n and title if applicable. (NOTE: RID DIRECTORS DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 TITLE 5.5 NAME 5.6 STREET ADDRESS 5.6 CITY-ST-ZIP	uired when reinstating)	DATE DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEWART, ANGEL 1811 SE 48TH ST. OCALA FL 34480 DVP STEWART, TRAVIS 1811 SE 48TH ST. OCALA FL 34480 DT STEWART, TVONNE 1811 SE 48TH ST. OCALA FL 34480 T FENN, JOHN 7700 S LEWIS AVE. TULSA OK 74136 T RUGGLES, BRIAN 2135 E 139TH ST.	DELETE DELETE DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE	uired when reinstating)	DATE DATE DATE DATE DEFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change 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, with all other like empowered.

SIGNATURE: J