FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N97000006875 (5)

BETHSAIDA TEMPLE MINISTRIES, INC.

Principal Place of Business Mailing Address 2136 SCHUMACHER AVENUE. #1 2136 SCHUMACHER AVENUE. #1 3. Date Incorporated or Qualified JACKSONVILLE FL 32207 JACKSONVILLE FL 32207 12/10/1997 4. FEI Number Applied For Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5855 FO/4 (C Suite, Apt. #, etc. 5855 FO4 Moline k Fee Required Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes **⊠**,No Country Country 8. This corporation owes or has paid the current year Intangible 25 Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 WILSON, WAYNE L SR. 82 Street Address (P.O. Box Number is Not Acceptable) 2136 SCHUMACHER AVENUE, #1 JACKSONVILLE FL 32207 83 84 City Zip Code 85 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** Signature, typed or printed name of registered agent and title if applicable (NOT): Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD THILE DELETE 1.1 TITLE Change Addition WILSON, WAYNE L SR. NAME 1.2 NAME 2136 SCHUMACHER AVENUE, #1 STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32207 CiTY+ST-ZIP 1.4 CITY-ST-ZIP VPTD DELETE TITLE Change 21 THUE Addition WILSON, TALITHA NAME 22 NAME 2136 SCHUMACHER AVENUE, #1 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL 32207 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE **Change** TITLE 3.1 TITLE Addition tookes, melissa Wilthen Kuickshiz 843 (Ucherman 761#403 NAME 3.2 NAME 843 ALDERMAN ROAD, #612 STREET ADDRESS 3.3 STREE1 ADDRESS JACKSONVILLE FL 32211 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change 6.1 TITLE ☐ Addition NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS**

64 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

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achment with an address.

FILED Apr 13 1998 8:00am Secretary of State