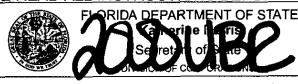
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR





**DOCUMENT#** 

N99000006118

1. Corporation Name

## WILLIE ALSCHEN INTERNATIONAL EVANGELISTIC MINISTRY, INC.

Principal Place of Business

2452 BEL-AIR CIRCLE

KISSIMMEE FL 34743

SIGNATURE:

Mailing Address

2452 BEL-AIR CIRCLE KISSIMMEE FL 34743 FILED

00 NOV -6 PM 12: 20

SECRETARY OF STATE TALLAHASSEE FLORIDA

Daytime Phone #



If above a	- ddroiseas ara	Incorrect in any way, line th	rough incorrect in	formation a	nd enter co	orrection below	l 				
If above addresses are incorrect in any way, line through incorre  New Principal Office Address, If Applicable  3. New M				ling Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     09/27/1999				
Suite, Apt. #, etc. Suite, Apt. P. C.				BAX 430471		5. FEI Number Applied For					
City & State City & S				& State			<u> </u>			Not Applicable	
Zip	p Country			Zip Country 34743-0471 US			6. CERTIFICATE OF STATUS DESIRED 6. \$8.75 Additional Fee required for a Certificate of Status				
7. Names	and Street Add	resses of Each Officer and	l/or Director (Flo	rida nonprot	fit corporat	ions must list at lea	ast 3 directors)				
Title(s)	name of Officers and/or Directors						Each ector City / State / Zip 4				
PD	ALSCHEN, WILLIE			2452 BEL-AIR CIRCLE				KISSIMMEE FL 34743			
D	ALSCHEN, MARK			2452 BEL-AIR CIRCLE				KISSIMMEE FL 34743			
D	WRIGHT, CHARRISSA			7303 WOODHILL PARK, APT. 533			13	ORLANDO FL 32808			
			····	·			90	-11/22/0	00	6794 1007006 *****61.25	
8. Name and Address of Current Registered Agent							9. Name and Address of New Registered Agent				
ALSCHEN, WILLIE 2452 BEL-AIR CIRCLE KISSIMMEE FL 34743						Name Street Address (P.O. Box Number is Not Acceptable)					
						Suite, Apt. #, Etc.					
•						City			State FL	Zip Code	
10. I, being Signature o Registered	of	e registered agent of the ab	begistered AG			h and accept the o	bligations of Section	on 607.0505, F.S.  Date//	, -	- P - O	
this rein owed b	statement app y the corporati	officer or director or the rece plication, the reason for diss on have been paid and the true and accurate, and my	solution has been names of individ	eliminated, uals listed o	the corpor on this form	rate name satisfies n do not qualify for	the requirements an exemption und	of section 607.0401 o	г 617.04	01, F.S., that all fees	

2052

## WILLIE ALSCHEN INTERNATIONAL EVANGELISTIC MINISTRY, INC. P. O. BOX 430471 KISIMMEE, FLORIDA 34743-0471

October 31, 2000

Department of State Division of Corporation Annual Report/Reinstatement Section P. O. Box 6327 Tallahassee, FL 32314

Re: Willie Alschen International Evangelistic Ministries, Inc.

Document N99000006118

Notice of Dissolution or Revocation

## Dear Sir/Madam:

This acknowledges receipt of your notice of revocation for the above referenced non-profit corporation.

The form indicated that two notices were sent to me, however, I did not receive any of these notices, which may be due to a change of address.

Enclosed is a check for \$61.25, with a request to waive the reinstatement fee. We are a small Ministry with limited funds and it would be a hardship for us at this time.

Your corporation in this matter is appreciated.

Sincerely, Dille & b chen

Willie Alschen