## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

700069

(8)

FIRST CHURC	CH OF TH	F NA7ARFNE	F COCOA	FI ORIDA	INC

FLORIDA INC.   1009 SOUTH FISKE BLVD   1009 SOUTH FISKE BLVD   ROCKLEDGE FL 32955     3. Date Incorporated or Qualified   10/21/1959   04/24/1995										
CONSIDER PROCESS   CONTINUES	Principal Place of Business Mailing Address				-				BOLL MEDIT MEDIT MINEL	OLDEN OLDIN QIŞIL 1801
DOS SOUTH FISICE BLVP   SOURCEOPE FI. 32855   3.   Date Proproported or Qualified   3.   Date of Less Especial Force	F	LORIDA INC		FLORIDA INC.						
2. Principal Pace of Business					/D					
Principal Place of Electronese  28. Maling Address 29. Milling Address 29. Suite, April 4, etc.  20. Country 20. Suite, April 4, etc.  20. Cry & State 20. Cry & State 20. Country 20. Suite, April 4, etc.  21. Country 20. Suite, April 4, etc.  22. Country 20. Suite, April 4, etc.  23. Country 20. Suite, April 4, etc.  24. Country 20. Suite, April 4, etc.  27. Country 20. Suite, April 4, etc.  28. This corporation is behalf for instance in State of St	F	OCKLEDGE	FL 32955	ROCKLEDGE FL 32955				3. Date incorporated or Qualified	3a. Date of I	ast Report
2.   Principal Place of Glumenes   2.   Ambring Address   3.   Control   2.   C										
SAME ACIT # 0100 SAME A	2.	Principal Pla	ace of Business	2a. Mailing Address					1 1	-1
27   City & State   City & City	21			26				59-1876850	Ī	Not Applicable
City & State    City & State   City & Color & Co		Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Cartificate of Statue Decired	□ \$8	.75 Additional
28	22			<del></del>				3. Continuate of Status position	LJ ,	ee Required
2p   Country   Zip   Country   S. This corporation has subtry for intargible tax under s. 198.082. Points Statutes   Ves   No.    9. Name and Address of Current Registered Agent   SMITH, DONALD M.   1800 WOODLAND DR   SMI		City & State	9	<del></del>				, , , ,		
26   26   30   50   50   50   50   50   50   50		7in	Country		Court			<del> </del>		
SMITH, DONALD M. 1600 WODDLAND DR #E108 ROCKLEDGE FL 32855  11. Fursuant to the provisions of Sections 817,0002 and 617,1508, Fonds Statutes, the above named corporation submits the statement for the purpose of changing its registered dispirat, or both, in the State of its ride, Sinch change was, uthorized by the corporation's board of directors. I hereby accept the appointment as registered dispiration for the purpose of changing its registered dispiration for both, in the State of its ride, Sinch change was, uthorized by the corporation's board of directors. I hereby accept the appointment as registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms of the purpose of changing its registered office or gradual forms or gradual forms of the purpose of changing its registered office or gradual forms or gradual		Ziţ)	<b>⊢</b> n ′	<b>⊢</b> `	<b>├</b>	ry		· · · · · · · · · · · · · · · · · · ·		er s. 199.032,
SMITH, DONALD M. 1800 WOODDLAND DR #E108 ROCKLEDGE FL 32955  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 gondy. Such change was suthorized by the corporation's board of directors, liberaby accept the appointment are registered office or registered agent, or both, in the State of gondy. Such change was suthorized by the corporation's board of directors, liberaby accept the appointment are registered office or registered agent, or both, in the State of gondy. Such change was suthorized by the corporation's board of directors, liberaby accept the appointment are registered office or registered agent, I am make the statement for the purpose of changing its registered office or registered agent, I am make the statement for the purpose of changing its registered office or registered agent, I am make the statement for the purpose of changing its registered office or registered agent, I am make the statement for the purpose of changing its registered office or registered agent, I am make the statement for the purpose of changing its registered office or registered office of registered office or registered office or registered office or registered office of registered office or registered office of registered office of registered office or registered office or registered office or registered office of registered office of registered office or registered office or registered office of registered office or registered office of registered office or registered of regist					130					
1270 Tuckaway Dr.					8	1 Nan	n <b>e</b>			
1270 Tuckaway Dr.		SMITH F	DONALD M				IITH.	DONALD M.		
#E108 ROCKLEDGE FL 32955  ## Cry Rock ledge, FL # 5 Zio Code 32955  ## 11. Pursuant to the provisions of Sections 617,0002 and 617,1500, Portical Statutes, the abover-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Eproda, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Eproda, Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, and the appointment as registered agent, and the product of the purpose of changing its registered office or registered agent, and the purpose of changing its registered office or registered agent, and the product of the purpose of changing its registered office or registered agent, and the product of the purpose of changing its registered office or registered agent, and the product of the purpose of changing its registered office or registered agent. I am a submit a submit a submit and the product of the purpose of changing its registered office or registered agent. I am a submit and the product of the product of directors. I hereby accept the appointment as registered agent. I am a submit and the product of directors. I hereby accept the appointment as registered agent. I am a submit a s					•	82 Street Address (P.O. Box Number Is Not Ad			Ð)	
ROCKLEDGE FL 32955  ### Crty Rockledge, FL ### State of 5 32955  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 Bonda, Such change was puthorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Bonda, Such change was puthorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent. I am state of the original puthod of the collegations of black of the collegation of the collegation of the collegations of black of the collegations of the collegation of					8	3	1. V 1.	DENDROS DA C		
Signature   Processor   Proc			DGE FL 32955		_	4 0	·			
11. Parsuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its rejidence of office or registered agent, in the State of Epineda, Such change was justified by the corporation's board of directors. I hereby accept the epinithenia is registered agent. I am familiar with, and accept the obligations of factor (pr. 0503, long Statutes)  SIGNATURE    Committed the obligations of factor (pr. 0503, long Statutes)   Committed the obligations of factor (pr. 0503, long Statut					8	4 City	Rocl	kledge,	FL  85	
SCINATURE   Symbol	11	. Pursuant t	o the provisions of Sections 617,0502 a	and 617.1508, Florida Statute	s, the above	namec	corporat	ion submits this statement for the purp	voce of changing	ite registered office
SCINATURE   Symbol		familiar wit	ed agent, or both, in the State of Morida th, and accept the obligations of Abctio	a Such change was authorize n 6/17.0503, Florida Statutes	d by the co	poratio	n's board	of directors. I hereby accept the appo	intment as registe	ered agent. I am
12.   CFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIC	SNATURE	Long	V la X Brill					2-6-	94
THE						ent signati	re required v		DATE	· · · · · · · · · · · · · · · · · · ·
NAME   SMITH, DONALD M.   12 NAME   12 NAME   12 NAME   12 TO TUCKAWAY DR.   12 TO TUCKAWAY DR.   12 NAME   12 NAM	_	1			_		10	ADDITIONS/CHANGES TO OFFI		
19   STREET ADDRESS   1600 WOODLAND DR #E108   19   STREET ADDRESS   1270 TUCKAWAY DR.			•				1 -	TEU DONALD M	[X] Chai	nge 🔲 Addition
City-Si-ZiP   ROCKLEDGE, FL 00000		i	•							
TR		į								
NAME				DELETE			KU	KLEDGE, FL 32955	Chai	nge Addition
STREET ADDRESS   987 BOXFORD LANE   23 STREET ADDRESS   2 4 CITY- ST-ZIP		ļ		Пресси					L_I Criai	ide 🗖 vanimu
CITY-ST-ZIP   ROCKLEDGE, FL 00000										
Tille							33			
NAME			1	DELETE	_				☐ Char	nge 🗀 Addition
STREET ADDRESS	NAN	AE	JONAS VIRGINIA	<del>-</del>						
TITLE  TR  COOPER, LAVERNE  STREET ADDRESS CITY-ST-ZIP  TITUSVILLE FL  A4. CITY-ST-ZIP  TITUS CULLEMBER, LORNA J.  STREET ADDRESS CITY-ST-ZIP  TITLE  TR  CULLEMBER, LORNA J.  STREET ADDRESS CITY-ST-ZIP  TITLE  TR  CULLEMBER, LORNA J.  STREET ADDRESS CITY-ST-ZIP  TITLE  TR  COKKLEDGE FL  TR  COKKLEDGE FL  TR  COCKLEDGE FL  SA CITY-ST-ZIP  TITLE  TR  COCKLEDGE  SA CITY-ST-ZIP  TR  COCKLEDGE  SA STREET ADDRESS CITY-ST-ZIP  SA CITY-ST-ZIP  TR  COCKLEDGE  SA STREET ADDRESS CITY-ST-ZIP  SA CITY-ST-ZIP  TR  COCKLEDGE  SA STREET ADDRESS CITY-ST-ZIP  ROCKLEDGE  FL  32955	STR	FET ADDRESS			3.3 STRE	et addre:	ss			
NAME COOPER, LAVERNE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP TITUSVILLE FL 4.4 CITY-ST-ZIP TITUSVILLE FL 5.1 TITLE CULLEMBER, LORNA J. STREET ADDRESS CITY-ST-ZIP TITLE TR ACKLEDGE FL TITLE TR SETTER, COLLEEN STREET ADDRESS STREET ADDRESS 647 DESOTO LANE STREET ADDRESS 642 NAME WILLIAMS, WALTER G3 STREET ADDRESS G62 BAYWARD PL. CITY-ST-ZIP ROCKLEDGE, FL SA CITY-ST-ZIP ROCKLEDGE, FL SA CITY-ST-ZIP STREET ADDRESS 642 NAME 652 NAME 653 STREET ADDRESS 644 DESOTO LANE 654 CITY-ST-ZIP ROCKLEDGE, FL SA	CIT	r-ST-ZIP	COCOA, FL 00000		3.4. CITY	- ST - ZIP				
STREET ADDRESS CITY-ST-ZIP TITUSVILLE FL  A.9 STREET ADDRESS CITY-ST-ZIP TITUSVILLE FL  S  CULLEMBER, LORNA J. STREET ADDRESS CITY-ST-ZIP  CULLEMBER, LORNA J. STREET ADDRESS CITY-ST-ZIP  TR  DELETE S.4 CITY-ST-ZIP  TR  DELETE S.4 CITY-ST-ZIP  TR  DELETE S.5 TITLE TR  DELETE S.6 TITLE TR  CHange TANAME SEITTER, COLLEEN SIREET ADDRESS G47 DESOTO LANE SIREET ADDRESS CITY-ST-ZIP  NAME SIREET ADDRESS G47 DESOTO LANE SIREET ADDRESS CITY-ST-ZIP NDIAN HARBOUR BEACH FL  G4 CITY-ST-ZIP ROCKLEDGE, FL 32955	TITL	.E		DELETE			1		Chai	nge 🔲 Addition
TITUSVILLE FL  S  DELETE  5.1 TITLE  NAME  CULLEMBER, LORNA J.  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TOLLE  TR  DELETE  6.1 TITLE  TR  DELETE  6.1 TITLE  TR  DELETE  6.2 NAME  6.3 STREET ADDRESS  SHITTER, COLLEEN  SHREET ADDRESS  647 DESOTO LANE  CITY-ST-ZIP  NOCKLEDGE, FL  64 CITY-ST-ZIP  ROCKLEDGE, FL  3.2955	NA <sup>1</sup>	<b>и</b> Е	COOPER, LAVERNE		4. 2 NAM	E				
TITLE S DELETE 5.1 TITLE CULLEMBER, LORNA J. 5.2 NAME  STREET ADDRESS CITY-ST-ZIP  TOTILE TR DELETE 6.1 TITLE TR  SETTER, COLLEEN 6.2 NAME  SIRRET ADDRESS 647 DESOTO LANE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  CITY-ST-ZIP  NAME SETTER, COLLEEN 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  NAME NAME SETTER, COLLEEN 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  SIRRET ADDRESS 6.4 DESOTO LANE 6.4 CITY-ST-ZIP  NOCKLEDGE, FL 32955	ราส	EET ADDRESS	4008 GARDEN STREET		4.3 STRE	ET ADDRE	ss			
NAME STREET ADDRESS CITY-ST-ZIP  TOTILE TR SETTER, COLLEEN SIREET ADDRESS SITTER, COLLEEN SIREET ADDRESS CITY-ST-ZIP  LOCKLEDGE STREET ADDRESS CITY-ST-ZIP  Addition  62 NAME WILLIAMS, WALTER G3 STREET ADDRESS CITY-ST-ZIP  NOLLEEN G47 DESOTO LANE G47 DESOTO LANE CITY-ST-ZIP NOLLEEN G48 CTY-ST-ZIP ROCKLEDGE, FL 32955	CIT	r-ST-ZiP			4.4 CITY	-ST-ZIP	·			
STREET ADDRESS CITY-ST-ZIP ROCKLEDGE FL TR DELETE SEITTER, COLLEEN SIREET ADDRESS SEITTER, COLLEEN SIREET ADDRESS CITY-ST-ZIP SIREET ADDRESS CITY-ST-ZIP SIREET ADDRESS CITY-ST-ZIP INDIAN HARBOUR BEACH FL S3 STREET ADDRESS CITY-ST-ZIP ROCKLEDGE, FL 32955			=	DELETE	5.1 TITLE				Char	nge
CITY-ST-ZIP  ROCKLEDGE FL  5.4 CITY-ST-ZIP  TITLE  TR  Change  Addition  NAME  SEITTER, COLLEEN  SIREKT ADDRESS  647 DESOTO LANE  CITY-ST-ZIP  INDIAN HARBOUR BEACH FL  5.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  ROCKLEDGE, FL  3.2955					5.2 NAM	E				
TITLE TR DELETE 6.1 TITLE TR Change MAddition  NAME SEITTER, COLLEEN 6.2 NAME WILLIAMS, WALTER  STREET ADDRESS 647 DESOTO LANE 6.3 STREET ADDRESS 962 BAYWARD PL.  CITY-ST-ZIP INDIAN HARBOUR BEACH FL 6.4 CITY-ST-ZIP ROCKLEDGE, FL 32955							SS			
NAME SEITTER, COLLEEN STREET ADDRESS 647 DESOTO LANE CITY-ST-ZIP INDIAN HARBOUR BEACH FL 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ROCKLEDGE. FL 32955				Moneye			mr			
STREET ADDRESS 647 DESOTO LANE 63 STREET ADDRESS 962 BAYWARD PL.  CITY-ST-ZIP ROCKLEDGE. FL 32955				₩]DFTF1F					☐ Char	nge 💢 Addition
CITY-ST-ZIP INDIAN HARBOUR BEACH FL 64 CITY-ST-ZIP ROCKLEDGE. FL 32955										
				ith this filing is valuntarily fund.			ROC	CKLEDGE, FL 32955	7/2004 Florida C	at day 16 dba-

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

GNATURE:

| SIGNATURE | SIGN

A 186101 18811 AAIH AAIH AAIN AAIN BIIN BIDI BIDII BIBN BIDII BIDII AIDII BIDII