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Mar 05, 1999 8:00 am
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03-05-1999 90063 009 ****70.00

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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 709415

1. Corporation Name

15TH STREET CHURCH OF CHRIST, INC.

* 1 73972 - 90063 - 6 2 *

Principal Place of Business

390 N.W. 15TH STREET
 P.O. BOX 271
 POMPANO BEACH FL 33061

Mailing Address

390 N.W. 15TH STREET
 P.O. BOX 271
 POMPANO BEACH FL 33061



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

08/10/1965

4. FEI Number

59-2449777

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

CLARKE, LARRY W
680 NW 23RD TERR
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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.

(NOTE: Registered Agent signature required when reinstating).

DATE

12.

OFFICERS AND DIRECTORS

TITLE DELETE

NAME **PTD**
CLARKE, LARRY W.
 STREET ADDRESS **680 N W 23RD TERR**
 CITY-ST-ZIP **POMPANO BCH FL**

TITLE DELETE

NAME **D**
RUSH, SYLVESTER
 STREET ADDRESS **631 NW 23RD TERRACE**
 CITY-ST-ZIP **POMPANO BEACH FL**

TITLE DELETE

NAME **D**
MOORE, MATHEW SR.
 STREET ADDRESS **220 NE 31ST STREET**
 CITY-ST-ZIP **POMPANO BEACH FL**

TITLE DELETE

NAME **D**
COLEY, JOHNNY
 STREET ADDRESS **1730 NW 5TH AVE.**
 CITY-ST-ZIP **POMPANO BEACH FL**

TITLE DELETE

NAME **S**
CAMPBELL, ANTHONY
 STREET ADDRESS **1258 S MILITARY TRL, APT 826**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE DELETE

NAME **D**
BALDWIN, GEORGE
 STREET ADDRESS **1731 NW 5TH AVE**
 CITY-ST-ZIP **POMPANO BEACH FL 33060**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME
 6.3 STREET ADDRESS
 6.4 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] **LARRY W. CLARKE**

2/18/99

9549721526

Date

Daytime Phone #

CR2E037 (11/98)