FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

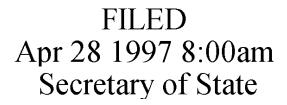
Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 7
1. Corporation Name

717351

(1)

THE EVANGELICAL FOUNDATION FOR CHRISTIAN SERVICE, INC.





Principal Place of Business		Mailing Address	Mailing Address			a endert ind na viate ianne biller diene biet ainte bene nebet aleit diete fant.			
880 SOUTH FEE FT. LAUDERDAL	DERAL HIGHWAY E FL 33316	880 SOUTH FEDERAL F FT. LAUDERDALE FL 33							
						3. Date Incorporated or Qualified 10/14/1969		ate of Last 6 04/30/19	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For		
21		26			59-1303444 Not Applicable			lot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional	
22		27				3. Certmoate of Status Desired	<u> </u>	Fee R	lequired
City & State	9	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28			Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip Coun		intry		8. This corporation has liability for			s. 199.032,
24	25	29	30				Yes No		
	9. Name and Address of Curren	nt Registered Agent		-7		10. Name and Address of New Re	gistered	Agent	
				81	Name				
ASHCRAFT, WILLIAM E.				82 Street Address (P.O. Box Number is Not Acceptable)					
	ITH FEDERAL HIGHWAY						·····		
FT. LAUC	DERDALE FL 33316			83					į
				84	City			85 Zip	Code
					•		FL	. `	i
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Sta	atules, the at	bove-	named co	rporation submits this statement for the pation's board of directors. I hereby accept	urpose o	f changing	its registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 617.0503,	Florida Stat	tutes.	ino oorpon	and to board of directors. This pay about	or in upp	on in the tal	, logistored
SIGNATURE .									
	Signature, typed or printed name of registered age			d Agen	it signature req	pired when reinstaling)	DATE	DIDECTO	DC IN 40
12.	OFFICERS AN	D DIRECTORS DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFIC	ENS AINL	Change	LA GENERAL
NAME	DORST, DAVID				[C Ondrige	LJ Addition
STREET ADDRESS 1900 S.W. 24TH TERR.				1 2 NAME					
1	FT. LAUDERDALE FL		1 3 STREET ADDRESS]
CITY-ST-ZIP TITLE				1.4 City - ST - ZIP 2 1 TITLE				Change	Addition
NAME	MORRIS, HUGH	☐ DELETE	2.2 N		•			Change	
	1111 SE 7TH ST.				ODDREC				
			2.3 STREET ADDRESS 2.4 City-St-Zip		ì				\$
CITY-ST-ZIP TITLE	SD	☐ DELETE	317		1-211			Change	Addition
NAME	GARAFALO, PAUL		3.2 N		İ				
STREET ADDRESS	5280 S.W. 4TH COURT				ADDRESS				
CITY-ST-ZIP	PLANTATION FL		1	:ITY-51	1				1
TITLE	D	DELETE	4.1 Ti		1-215		•	Change	Addition
NAME	HOXIE,JACK		4.2 N						
STREET ADDRESS	1008 IROQUOIS AVENUE				ADDRESS				İ
CITY-ST-ZIP	FT. LAUDERDALE FL			ITY-ST					i
TITLE	D DODLIDALL IL	DELETE	5.1 TI		- 211			Change	Addition
NAME	MARKS, DON		5.1 N						
STREET ADDRESS	1443 S.W. 13TH CT.		-		ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL			TY-ST					
TITLE	VP	DELETE	6.1 TI		- LIF		•••	Change	Addition
NAME	MOSES, TED		6.2 N		}				
STREET ADDRESS	904 S.E. 6TH COURT				ADDRESS				!
	FT. LAUDERDALE FL								
CITY-ST-ZIP	FI. LAUDENDALE FL		5.4 CI	ITY-ST	-zir				

14. I do 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 justee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter or attachment with an arrivess.