FILE NOW: FILING FEE IS \$61.25

STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

TITLE

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FILED NONPROFIT Feb 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # (1)CHURCH OF CHRIST OF VENICE, INC. Principal Place of Business Mailing Address 4301 HWY 776 4301 HWY 776 3. Date Incorporated or Qualified VENICE FL 34293 VENICE FL 34293 04/21/1972 4. FEI Number Applied For 59-1597195 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional П 5. Certificate of Status Desired 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes No 28 ZID Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TREECE, JAMES 62 Street Address (P.O. Box Number is Not Acceptable) 221 S. VENICE BLVD. 83 VENICE FL 34293 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE PD DELETE 1.1 TITLE ☐ Change Addition TREECE, JAMES NAME 1.2 NAME 221 S. VENICE BLVD. STREET ADDRESS 1.3 STREET ADDRESS **VENICE FL** CITY-ST-ZIP 1.4 CITY - ST- ZIP TITLE SD DELETE 2.1 BILE Change Addition NAME VOWELL, WAYNE 22 NAME 420 PALM CREEK DRIVE STREET ADDRESS 2.3 STREET ADDRESS ENGLEWOOD FL CITY-ST-Z# 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE TREUSUESAL Addition NAME RIGGENBACH. CLARENCE 3.2 NAME HAROLA CLARKE 922 UPLANDS AVENUE TILES CYPRESS HOLLOW STREET ADDRESS 3.3 STREET ADDRESS VENICE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP SALASOTA, FL DELETE Change 4.1 TITLE Addition NAME 4.2 NAME

CITY-ST-ZIP 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Change

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Addition

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4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE