

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 744950 (7)
1. Corporation Name
CHRISTIAN CHURCH OF PROPHECY INC.



Principal Place of Business
2216 ERIN AVE
HOLIDAY FL 34690
US

Mailing Address
2216 ERIN AVE
HOLIDAY FL 34690
US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26 PO BOX 0136	11/15/1978	02/17/1995
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	27	59-2893515	Not Applicable
City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23	28 TARPON SPRINGS FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes ☐ No ☒
24	25 34688	30 us	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZALESKI, CAROL J REV
263 MILWAUKEE AVE
APT 110
SUNEDIN FL 34698

NAME CHANGE
DUE TO DIVORCE

81 Name	REV. CAROL J. DeMars
82 Street Address (P.O. Box Number is Not Acceptable)	747 HAVEN PLACE
83	
84 City	TARPON SPRINGS FL
85 Zip Code	34689

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 REV. CAROL J. DeMars Rev. Carol J. DeMars 4/21/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☒ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	JOHNSTON, ROBT H, REV, FR	1.2 NAME	BRUCE GARY
STREET ADDRESS	1622 A LEISURE LANE	1.3 STREET ADDRESS	2463 BAYBERRY DR.
CITY - ST - ZIP	DUNEDIN FL	1.4 CITY - ST - ZIP	CLEARWATER, FL
TITLE	VP ☐ DELETE	2.1 TITLE	
NAME	EPLER, REV. DORIS	2.2 NAME	
STREET ADDRESS	3725 CHERRYWOOD DR.	2.3 STREET ADDRESS	
CITY - ST - ZIP	HOLIDAY FL	2.4 CITY - ST - ZIP	
TITLE	P ☐ DELETE	3.1 TITLE	P ☐ Change ☐ Addition
NAME	ZALESKI, CAROL J REV	3.2 NAME	DeMars, CAROL J. REV.
STREET ADDRESS	263 MILWAUKEE	3.3 STREET ADDRESS	747 HAVEN PLACE
CITY - ST - ZIP	DUNEDIN FL	3.4 CITY - ST - ZIP	TARPON SPRINGS FL, 34689
TITLE	D ☐ DELETE	4.1 TITLE	
NAME	CRANE, REV. SANDRA	4.2 NAME	300001802623
STREET ADDRESS	1741 FAIRFIELD ST.	4.3 STREET ADDRESS	-05/01/96--01017--038
CITY - ST - ZIP	HOLIDAY FL	4.4 CITY - ST - ZIP	***70.00
TITLE	D ☐ DELETE	5.1 TITLE	D ☐ Change ☐ Addition
NAME	STEELY, WILLIAM R R	5.2 NAME	STEELY, WILLIAM REV. N/A
STREET ADDRESS	P O BOX 3418	5.3 STREET ADDRESS	P O BOX 3418
CITY - ST - ZIP	SPRING HILL FL	5.4 CITY - ST - ZIP	SPRING HILL FL
TITLE	TSD ☐ DELETE	6.1 TITLE	
NAME	FRAME, BRUCE	6.2 NAME	
STREET ADDRESS	710 E. PENT ST	6.3 STREET ADDRESS	
CITY - ST - ZIP	TARPON SPRINGS FL	6.4 CITY - ST - ZIP	

14. 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.

SIGNATURE: Rev. Carol J. DeMars REV. CAROL J DeMars 4/21/96 8/3 408-3360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)

4/30/96