

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 24 PM 2:30

DOCUMENT # 750425 (1)

1. Corporation Name
SUNCOAST CHURCH OF CHRIST, INC.

Principal Place of Business Mailing Address
5561 HYPOLUXO ROAD 5561 HYPOLUXO ROAD
LAKE WORTH FL 33463-4301 LAKE WORTH FL 33463-4301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/31/1979
3a. Date of Last Report 05/01/1994
4. FEI Number 59-0389375
Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 2b. Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

5. Certificate of Status Desired \$6.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes. Yes No

9. Name and Address of Current Registered Agent
FRANKLIN RIBBLE
4549 BANGOR AVE. #28
WEST PALM BEACH FL 33417

10. Name and Address of New Registered Agent
81 Name RAYMOND RUSSELL
82 Street Address (P.O. Box Number is Not Acceptable) 3827 WOODS WALK BLVD
83
84 City LAKE WORTH FL 85 Zip Code 33467

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Raymond Russell Raymond Russell 3-5-95
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	SD
NAME	SWAN, GERALD
STREET ADDRESS	1030 N 'E' ST
CITY - ST - ZIP	LAKE WORTH FL
TITLE	D
NAME	LERRO, RICHARD J
STREET ADDRESS	6565 MONMOUTH RD
CITY - ST - ZIP	W PALM BCH. FL
TITLE	PD
NAME	RUSSELL, RAYMOND
STREET ADDRESS	3827 WOODS WALK BLVD
CITY - ST - ZIP	LAKE WORTH FL
TITLE	D
NAME	BATHRIGHT, RICHARD
STREET ADDRESS	4936 PALM WAY
CITY - ST - ZIP	LAKE WORTH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	CLARENCE LALLA	
1.3 STREET ADDRESS	6190 HONEYWOOD WAY	
1.4 CITY - ST - ZIP	LAKE WORTH FL 33463	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	RICHARD GATHRIGHT	
4.3 STREET ADDRESS	4936 PALM WAY	
4.4 CITY - ST - ZIP	LAKE WORTH FL	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 110.07(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: Raymond Russell Raymond Russell 3-5-95 407-641-7225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signing Here)