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NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 750577

(9)

1. Corporation Name COMMUNITY CHRISTIAN CHURG	CH OF OKEECHOBEE,	INC.				
Principal Place of Business	Mailing Address				II LAAN ATAH ALARA MINI	BIBIT BIBIT BIBIT 1581
8082 HWY 70 WEST P O BOX 1965 OKEECHOBEE FL 34973	8082 HWY 70 WEST P O BOX 1965 OKEECHOBEE FL 349					
				3. Date Incorporated or Qualified 01/11/1980	3a. Date of 03/0	ast Report 3/1995
2. Principal Place of Business 1. 8082 Hwy 70 wes Suite, Apt. #, etc.		70 WK	's <i>T</i>	4. FEI Number 59-2055439		Applied For Not Applicable
OKEECHOSEE FL. City & State	Suite, Apt. #, etc. 27 P.O. ROX	1965	<u></u>	5. Certificate of Status Desired		.75 Additional ee Required
3	City & State 28 OK BX HOBB	v FL.		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
7ip Country 25 OK 125 HD 184	Zip 29 349 73	Country 30 OKER	Hoser		Yes 🐼 No	
9. Name and Address of Curr	ent Registered Agent	-	A1	10. Name and Address of New F	Registered Ageni	
VELCUNEED TURODODE I		81	Name			
KELCHNEER, THEODORE L 7984 SW 13TH ST		82	Street Addres	s (P.O. Box Number is Not Acceptat	ole)	
OKEECHOBEE FL 34974		83				
		84	City		— 65	Zip Code
Pursuant to the provisions of Sections 617.05	02 and 617 1609 Florido Statut					•
The section of the previous of the section is of 7.000	oz and o m. 1506, fiorda statut		med corporation	on submits this statement for the pu	rpose of changing	its registered offic
or registered agent, or both, in the State of Flo	orida. Such change was authoriz	zed by the corpora	ation's board o	of directors. I hereby accept the app	iointment as regist	erecielo ent. Iam
 Pursuant to the provisions of Sections 617.05 or registered agent, or both, in the State of Fic familiar with, and accept the obligations of, Se 	orida. Such change was authorizaction 617.0503, Florida Statutes	zed by the corpora s.	ation's board o	of directors. I hereby accept the app	iointment as regist	ereg egent. I am
the obligations of Op	Chori o 11.0000, Florida Statute	5.				erec agent. I am
IGNATURE Signature, typed or printed name of registered age 2. OFFICERS A	Chori o 11.0000, Florida Statute	Zed by the corpora S. DTE: Registered Agent si		nen reinstating)	DATE	
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