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Apr 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 757483 (3)
 1. Corporation Name

CHRIST COMMUNITY CHURCH OF BRANDON, INC.



Principal Place of Business 1310 JOHN MOORE RD BRANDON FL 33511	Mailing Address 1310 JOHN MOORE RD BRANDON FL 33511-6304
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3. Date Incorporated or Qualified 04/09/1981	3a. Date of Last Report 01/31/1996
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2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country	4. FEI Number 59-2086023 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent HINES, JAMES P 1310 JOHN MOORE RD BRANDON FL 33511				10. Name and Address of New Registered Agent	
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)	
83.				84. City	
				85. Zip Code FL	

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDENS, CHRIS		1.2 NAME	FLAWS, LAWRENCE	
STREET ADDRESS	1310 JOHN MOORE RD		1.3 STREET ADDRESS	1310 JOHN MOORE RD.	
CITY-ST-ZIP	BRANDON FL 33511		1.4 CITY-ST-ZIP	BRANDON, FL 33511	
TITLE	SD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JARRETT, RICHARD E		2.2 NAME	XYNIDES, CHRIS	
STREET ADDRESS	1310 JOHN MOORE RD		2.3 STREET ADDRESS	1310 John Moore Rd.	
CITY-ST-ZIP	BRANDON FL 33511		2.4 CITY-ST-ZIP	Brandon, FL 33511	
TITLE	PD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MINTER, STEVEN S. (REV)		3.2 NAME		
STREET ADDRESS	1310 JOHN MOORE RD		3.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511		3.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATEMAN, RICK		4.2 NAME		
STREET ADDRESS	1310 JOHN MOORE RD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511		4.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETER, JOHN		5.2 NAME		
STREET ADDRESS	1310 JOHN MOORE RD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511		5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 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: *Steven S. Minter* **REQUIRED** **S. Minter** Date: **4/1/97** (813) 685-6786
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day/Time Phone # 0045464

CR2E037 (9/96)