

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 16 PM 3:12

DOCUMENT # 768955 (7)

1. Corporation Name
CHURCH OF POSITIVE LIVING, INC.

Principal Place of Business Mailing Address
140 CALLAWAY AVE. 140 CALLAWAY AVE.
SPRING HILL FL 34606 SPRING HILL FL 34606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/15/1983	3a. Date of Last Report 02/01/1994
4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 20
22	27
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24	29
25	30

9. Name and Address of Current Registered Agent STEELY, RENEE REV. 140 CALLAWAY AVE. SPRING HILL FL 34606		10. Name and Address of New Registered Agent	
B1	Name	B5	Zip Code
B2	Street Address (P.O. Box Number is Not Acceptable)		
B3			
B4	City		

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 _____
Signature typed or printed name of registered agent and filed agent (if applicable) (P.O. Box number required when necessary) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEELY, RENEE	12 NAME	
STREET ADDRESS	140 CALLAWAY AVE.	13 STREET ADDRESS	
CITY, ST, ZIP	SPRING HILL FL 34606	14 CITY, ST, ZIP	
TITLE	V	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEELY, BILL	22 NAME	
STREET ADDRESS	18927 QUERCUS DR. #9	23 STREET ADDRESS	
CITY, ST, ZIP	HUDSON FL 34667	24 CITY, ST, ZIP	
TITLE	SD	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PILLEY, DANIELLE	32 NAME	
STREET ADDRESS	1280 WIMBERLY CT.	33 STREET ADDRESS	
CITY, ST, ZIP	BROOKSVILLE FL 34607	34 CITY, ST, ZIP	
TITLE	T	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RENEE, STEELY REV.	42 NAME	
STREET ADDRESS	140 CALLAWAY AVE.	43 STREET ADDRESS	
CITY, ST, ZIP	SPRING HILL FL 34606	44 CITY, ST, ZIP	
TITLE	D	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOSLEY, ROSSI	52 NAME	
STREET ADDRESS	7253 WIMBERLY CT.	53 STREET ADDRESS	
CITY, ST, ZIP	BROOKSVILLE FL 34607	54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 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)(b), Florida Statutes. I further certify that the information included 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 the report as required by Chapter 127, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE *Renee Steely Pres II* **Renee Steely Pres II** 904-686-9541
Signature typed or printed name of reporting officer or director