

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 APR -6 PM 12:15

DOCUMENT # **N03021 (5)**

1. Corporation Name
SWISS COVE CHRISTIAN CHURCH, INC.

Principal Place of Business Mailing Address
1965 STATE ROAD 13 JACKSONVILLE FL 32259

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/10/1984** 3a. Date of Last Report **01/20/1994**
4. FEI Number **59-2403764** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75** 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. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
**BURNHAM, R. LAVON CPA
1235 LEMONWOOD ROAD
JACKSONVILLE FL 32259**

10. Name and Address of New Registered Agent
81 Name **Same as Current Articles of Inc.**
82 Street Address (P.O. Box Number is Not Acceptable) **EXCEPT BURNHAM IS CORRECT SPELLING**
83 **NOT BURNHAM**
84 City **FL** 85 Zip Code

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 _____ (NOTE: Registered Agent Signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **SEPULVEDA, DAVID**
STREET ADDRESS **12734 PLUMMER GRANT RD.**
CITY - ST - ZIP **JACKSONVILLE FL 32258**

TITLE **D**
NAME **SPACE, CHARLIE**
STREET ADDRESS **1967 LARGO RD.**
CITY - ST - ZIP **JACKSONVILLE FL**

TITLE **D**
NAME **KIMBALL, JEFF**
STREET ADDRESS **3114 PURDOM RD.**
CITY - ST - ZIP **JACKSONVILLE FL 32223**

TITLE **D**
NAME **WITMER, JEFF**
STREET ADDRESS **12119 BLACKFOOT TRAIL**
CITY - ST - ZIP **JACKSONVILLE FL 32227**

TITLE **D**
NAME **JONES, DON** *"LEAVE" TR*
STREET ADDRESS **569 TIVOLI DR** *"MS 15. W 22"*
CITY - ST - ZIP **JACKSONVILLE FL 32259**

TITLE **D**
NAME **BURNHAM, R. LAVON**
STREET ADDRESS **1235 LEMONWOOD RD**
CITY - ST - ZIP **JACKSONVILLE FL 32259**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **Director** Change Addition
12 NAME **Burle Wiggins**
13 STREET ADDRESS **1191 Eagle Bluff Ln.**
14 CITY - ST - ZIP **Jacksonville FL**

21 TITLE **Director** Change Addition
22 NAME **Jones, Don**
23 STREET ADDRESS **569 Tivoli Drive**
24 CITY - ST - ZIP **Jacksonville, FL 32259**

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
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 119.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: *[Signature]* **2/19/95** **904-396-5531**
DATE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR