FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

(1)

CHRISTALORD MINISTRIES FOR DISCIPLES IN CHRIST, INC.

Principal Place of Business Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



1621 N DIXIE HWY P O BOX 9511			3. Date Incorporated or Qualified			
FT LAUDERDALE FL 33305 FT LAUDERDALE FL 33310				06/13/1985		
US		US			lied For	
					Applicable	
2. Principal Place of Business 2n. Mailing Address			-	5. Certificate of Status Desired S8.75 Ac	ditional	
21 1621 North Dixie Hwy. 28 P.O. Box			9511	Fee Req	ulred	
Suite, Apt. #, etc. Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 M		
22 27 City & State City & State				Trust Fund Contribution Added to I		
City & State City & State City & State 23 / Ft. Lauderdale, FL 28 Ft. Laude			ordalo El	7. Is this nonprofit corporation a homeowners association? — Yes 🛣 No	?	
Zip	Country	Zip Ft. Laud	Country	8. This corporation owes or has paid the current year Inter	ngible	
24 33305	5 25	29 33310	30 US	Personal Property Tax due June 30. Yes		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
[81] No.				nambova Pladas O		
MITCHELL, GEORGE WINSTON 82 Stre				nambers, Eloise O. ddress (P.O. Box Number is Not Acceptable)		
1301 S.E. 1ST AVENUE				oddress (P.O. Box Number is Not Acceptable)		
DEERFIELD BEACH FL 33441			83			
			84 City_	85 Zip Co		
11 Churchant	to the provisions of Sections 617 0502	and 617 1509. Elorida Statuta	La La	auderdale Lakes FL 85 Zip Co	313	
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.						
Plains O Chambana Durations 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
SIGNATURE Eloise O. Chambers - President (NOTE: Registered Agent signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature signature agent when reinstating) DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
TITLE	CPT	DELETE	1.1 TITLE	Founder Change	Addition	
NAME	MITCHELL, GEORGE W		1.2 NAME	Mitchell, George W.		
STREET ADDRESS	1301 SE 1ST AVE		1.3 STREET ADDRESS	1301 SE 1st Avenue		
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	¥-54 ·	1.4 CITY-ST-ZIP	Deerfield Beach, FL 33441		
TITLE	Ť	☐ DELETE	2.1 TITLE	P	Addition	
NAME	LYONS, CHRISTINE		2.2 NAME	Chambers, Eloise O.		
STREET ADDRESS	1460 NW 28TH ST B		2.3 STREET ADDRESS	3000 NW 48th Terrace #418		
CITY-ST-ZIP	FT LAUDERDALE FL 33311	DELETE	2 4 CITY-ST-ZIP	Lauderdale Lakes, FL 33313	Addition .	
TITLE,	VP DAIN ADTHID I	ET DETER	3.1 TITLE 3.2 NAME	- -	Auomon	
NAME STREET ADDRESS	Bain, arthur L. 2180 NW 33 Ave		3.3 STREET ADDRESS	Schwartz, Scott 414 S. "O" St. #3		
CITY-ST-ZIP	LAUDERDALE LAKE FL		3.4. CITY-ST-ZIP	Lake worth, FL		
TITLE	T	☐ DELETE	4.1 TITLE	S Change	Addition	
NAME	Swartz, Elizabeth		4. 2 NAME	Evans, Gayle V.		
STREET ADDRESS	414 S "O" ST #3		4.3 STREET ADDRESS	688 N.W. 20th Street		
CITY-ST-ZIP	LAKEWORTH FL		4.4 CITY-ST-ZIP	Pompano Beach, FL 33060		
TITLE		☐ DELETE	5.1 TITLE	C Change	Addition	
NAME			5.2 NAME	Bain, Arthur L.		
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY-ST-ZIP	2180 NW 33th Avenue Ft. Lauderdale, FL 33311	T 4 2 11-2	
TITLE		☐ DELETE	6.1 TITLE	☐ Change	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-SI-ZIP	with that the information conding with	NOTE 490	6.4 CITY-ST-ZIP	t in Contine 110 07/2Vi). Floride Statutes I further contifu that the in		

reflect 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 informatio 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.