

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N13820 (8)

1. Corporation Name  
HOLY REDEEMER CHURCH IN CHRIST, INC.



Principal Place of Business: 1484 NORTHWEST 58TH TERRACE MIAMI FL 33142  
Mailing Address: 1484 NORTHWEST 58TH TERRACE MIAMI FL 33142

3. Date Incorporated or Qualified: 03/13/1986  
3a. Date of Last Report: 02/03/1995

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number 59-2607666	Applied For	Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip	25	Country	29	Zip	30	Country
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

WALKER, RICHARD  
8325 NORTHWEST 29TH COURT  
MIAMI FL 33147

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD WALKER, RICHARD	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8325 NW 29 CT		1.2 NAME
STREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS
CITY-ST-ZIP			1.4 CITY-ST-ZIP
TITLE	VD WALKER, FLORA	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8325 NW 29 CT.		2.2 NAME
STREET ADDRESS	MIAMI FL		2.3 STREET ADDRESS
CITY-ST-ZIP			2.4 CITY-ST-ZIP
TITLE	SD WOODWARD, GLADYS	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	19331 NW 193RD ST.		3.2 NAME
STREET ADDRESS	MIAMI FL		3.3 STREET ADDRESS
CITY-ST-ZIP			3.4 CITY-ST-ZIP
TITLE	TD ARTIS, JANNIE	<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3848 NW 207TH ST.		4.2 NAME
STREET ADDRESS	MIAMI FL		4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE	CDS WALKER, STACY	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1325 NW 58 STREET		5.2 NAME
STREET ADDRESS	MIAMI FL		5.3 STREET ADDRESS
CITY-ST-ZIP			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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Flora D. Walker*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: FLORA D. WALKER  
Date: 1-24-96  
Daytime Phone #: (305) 693-9190

CR2E037 (12/95)