

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

**FILED**

**Feb 04 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N14543 (5)**  
1. Corporation Name  
**TRUE FELLOWSHIP CHURCH, INC.**



Principal Place of Business 1110 27TH ST SE RUSKIN FL 33570-1237 US	Mailing Address P.O. BOX 1237 RUSKIN FL 33570-1237
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3. Date Incorporated or Qualified  
**04/22/1986**

4. FEI Number  
**59-2767377**

Applied For	
Not Applicable	<input checked="" type="checkbox"/>

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

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. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**CRENSHAW, WILLIAM**  
4101-32ND ST. S.E. LOT 12  
P.O. BOX 1237 X  
SUN CITY CENTER FL 33571 X

10. Name and Address of New Registered Agent

81 Name	<b>S A M E</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>4101-32ND ST. S.E. LOT 12</b>
83	
84 City	<b>RUSKIN FL</b>
85 Zip Code	<b>33570</b>

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

TITLE	VD	<input type="checkbox"/> DELETE
NAME	BRADY, RALPH	
STREET ADDRESS	1603 3RD ST. S.E.	
CITY-ST-ZIP	RUSKIN FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	CRENSHAW, WILLIAM	
STREET ADDRESS	4101-32ND ST. S.E. (P.O. BOX 5086X) <del>delete</del>	
CITY-ST-ZIP	(SUN CITY CENTER FL X)	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	MEREDITH, RICHARD	
STREET ADDRESS	1911 14TH AVE. SE	
CITY-ST-ZIP	RUSKIN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BUZBEE, FRANK LAMAR	
STREET ADDRESS	1308 SWEENEY DR.	
CITY-ST-ZIP	RUSKIN FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>4101-32ND ST. SE. LOT 12</b>
2.4 CITY-ST-ZIP	<b>RUSKIN, FL 33570 -</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: William V. Crenshaw **WILLIAM V. CRENSHAW** JAN-20-1998-813-645-5083

CR2E037 (10/97)