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

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N15981 1. Corporation Name

BRANDON CHRISTIAN FELLOWSHIP, INC.

512,410		, , , , , ,					
Principal Place of Business Mailing Address			<del>-</del>			Ē	i
207 ROSIER R		207 ROSIER ROAD				III	<b>                 </b>
P O BOX 1684 P O BOX 1684 BRANDON FL 33509-1684 BRANDON FL 33509-1							
BRANDON FL 33509-1684 BRANDON FL 33509-1684 US US							
00							
2. Principal P	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed		
21		26			07/22/1986 4. FEI Number	<del></del>	-Nord Co.
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-2724159	<u> </u>	olied For Applicable
22 City & Stat		City & State				\$8.75 A	
23	•	28			5. Certifcate of Status Desired	Fee Rec	
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00	May Be
24	25	29 30			Trust Fund Contribution	Added to	Fees
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name	·		
SHANNON, RICHARD J.			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
4001 ALAFIA BLVD			83				
BRANDON	FL 33351				<u> </u>	- I C	
			84		Fl		
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes, t	he above	e-named co	rporation submits this statement for the purpose of	f changing its	registered
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was autho	rized by	the corpora	tion's board of directors. I hereby accept the appo	inunent as reg	Jisteren
SIGNATURE							
	Signature, typed or printed name of registered age			nt signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DS IN 12
	<del>,</del>	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	PD	□ Detele	1.1 IIILE		•	. O onango	
NAME	SHANNON, RICHARD J.		1.3 STREET	T ADDRESS		`	
STREET ADDRESS	4001 ALFIA BLVD BRANDON FL		1.4 CITY-S	l.	•		
CITY-ST-ZIP TITLE	TD	☐ DELETE	2.1 TITLE	1-21-		Change	☐ Addition
NAME	SPRADLING, TRENTON L.	i i	2.2 NAME		•		
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		2.3 STREET	T ADDRESS	v		•
CITY-ST-ZIP	BRANDON FL		2.4 CITY-S	ST-ZIP		<u> </u>	<u> </u>
TITLE	SD	☐ DELETE	3.1 TITLE			Change	Addition
NAME	SHANNON, ELIZABETH T.		3.2 NAME				
STREET ADDRESS	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3.3 STREE	TADORESS			
CITY-ST-ZIP	BRANDON FL	[] actor	3.4. CITY-5	ST-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TITLE			- Change	
NAME			4. 2 NAME	1			
STREET ADDRESS			4.4 CITY-S	T ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	11-2#		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADORESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	· .		
TITLE		☐ DELETE	8.1 TITLE			Change	☐ Addition
	Ì		6.2 NAME	i			!

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 aron an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

813-681-5444

**FILED** 

03-09-1999 90055 004 \*\*\*\*70.00

Mar 09, 1999 8:00 am § Secretary of State