

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 05 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N20535 (3)
1. Corporation Name
FREEDOM CHRISTIAN CENTER, INC.



Principal Place of Business: 7200 N. WICKHAM RD, MELBOURNE FL 32940, US
Mailing Address: 7200 N. WICKHAM RD, MELBOURNE FL 32940-7524, US

3. Date Incorporated or Qualified: 05/07/1987
3a. Date of Last Report: 01/31/1996
4. FEI Number: 59-2813264
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21. 2955 Pineda Causeway (Suite) Apt. #, etc. 215
22. City & State: Melbourne FL, Zip: 32940, Country: USA
23. Mailing Address
26. 2955 Pineda Causeway (Suite) Apt. #, etc. 215
27. City & State: Melbourne FL, Zip: 32940, Country: USA

9. Name and Address of Current Registered Agent: FRANKLIN, TIMMY DAYTON, 345 BAYHEAD DRIVE, MELBOURNE FL 32940
10. Name and Address of New Registered Agent: (Blank)

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	PVD FRANKLIN, TIMMY DAYTON 345 BAYHEAD DRIVE MELBOURNE FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	SD BLANKS, JIM 265 APPLEWOOD CIR. MELBOURNE FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	VD CROSWELL, JOE 635 MYRTLE WAY MELBOURNE FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	T MCLARTY, JAN 1435 HAGEN LN ROCKLEDGE FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	D WEIR, JOHN 1406 BRONCO DR. MELBOURNE FL	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		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 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: Timmy D. Franklin 2/28/97 (407) 254-0546

CR2E037 (9/96)