FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31458

(5)

THE FIRST CHRISTIAN CHURCH OF TALLAHASSEE, FLORI DA, INC.

DA, INC.										
Principal P	Place of Business	Mailing Address								
1319 HIGH RD TALLAHASSEE FL 32304 US		C/O MICHAEL HOLLAND 4015 APALACHEE PKWY TALLAHASSEE FL 32311-0704			Date Incorporated or Qualified	3a Date	e of Last i	Renort		
		US				03/31/1989	03	3/07/19	96	
· ·	al Place of Business	2a. Mailing Address	F			4. FEI Number 59-1595349			Applied For	
21 Suite, A	vpt #, etc.	Suite, Apt #, etc.				39 1333543			Not Applicable Additional	
22		27]			5. Certificate of Status Desired			Required		
City & S	State	City & State				6. Election Campaign Financing		•	May Be	
Zip Country		28	Zip Country			Trust Fund Contribution Added to Fees				
24	25 29 30			y		8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes				
	Name and Address of Curre					10. Name and Address of New Re				
			81	1	Name			•		
	AND, MICHAEL G.		82 Street Addre			ess (P.O. Box Number is Not Acceptate	ole)			
	APALACHEE PARKWAY		83	-				······································		
IALLA	HASSEE FL 32311									
			84	4	City		FL	85 Zip	Code	
11. Pursua	ant to the provisions of Sections 617.05 or registered agent, or both, in the Stati I am familiar with, and accept the oblig	02 and 617.1508, Florida Statu	utes, the above	ve-	-named corp	oration submits this statement for the p	ourpose of c	hanging	its registered	
agent	I am familiar with, and accept the oblig	gations of, Section 617.0503, F	Torida Statute	BS.	the corporati	ion's board of directors. Thereby accep	эт ине аррог	липен а	s registered	
SIGNATUR	Stignatine Typed or printed name of registered as	No.	500 800 100 100							
12.		ND DIRECTORS	13.	geni	it signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CEBS AND I	DIBECTO	RS IN 12	
101LF	з	DELETE	1.1 TITLE	••••	P			Change		
NAME	SHOTWELL, CHARLES		1.2 NAME	i						
STREET ADDRES			1.3 STREE	ET A	ADDRESS					
CITY - ST - ZIP	TALLAHASSEE FL	TALLAHASSEE FL DELETE		1.4 CITY-ST-ZIP 2.1 TITLE				Change	Addition	
NAME	HART, THOMAS	[] DECENT		2.2 NAME			Ľ	zj Change	Addition	
STREET ADDRES	AA4A A4544E44B 66				ADDRESS 26	She Foret lane				
CITY - ST - ZIP	7411 ALIAOOFF F1			2. 4 CITY-ST-ZIP 74		056 Egret lane .Uahubsie, FL 32308	3			
TITLE	DT	DELETE	3.1 TITLE	******				Change	Addition	
NAME	HOLLAND, MICHAEL G.		3.2 NAME							
STREET ADDRES	S 4015 APALACHEE PKWY TALLAHASSEE FL		3.3 STREE		i					
CHY-ST-ZIP TILE	D	DELETE	3.4. CITY 4.1 TITLE		D		<u>_</u>	Change	Addition	
NAME	GRAHAM, LARRY	•	4. 2 NAMI		Jes	ss Nable .	-			
STREET ADDRES	140 Ums 4144414 Tm		4.3 STREE	TÁ	ADDRESS 112	20 Surasota Drive				
City - St - Zip	TALLAHASSEE FL		4.4 CITY		-ZIP Ta	llahessee, PL 32301				
TITLE	-	D DELETE 5.1					L	Change	Addition	
NAME STREET AUDRES	REED, MERELITH SS BLUEBIRD RD		5.2 NAME		1000500					
CITY ST-ZIP	MONTICELLO FL		5.3 STREE 5.4 CITY-							
THUE	D	☐ DELETE	6.1 TITLE		- EII			Change	Addition	
NAME	SUMMERS, DONALD		6.2 NAME				_	-		
STREET ADDRES			6.3 STREE	TA	ADDRESS					
CITY-SE-ZIP	TALLAHASSEE FL		64 CITY-	ST-	- ZIP				ļ	

14. I do hereby certify that the information supplied with this filing does not qualify or 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 atlachment with an address.

SIGNATURE:

Michael G. Holland

3-24-97

224-2727

FILED

Mar 27 1997 8:00am

Secretary of State