

FILE NOW: FILING FEE IS \$61.25

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Apr 25 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 # N39076 (7)

1. Corporation Name
CHURCH ON THE ROCK OF LEE COUNTY, INC.



Principal Place of Business
1629 SE 47TH ST
CAPE CORAL FL 33904
US

Mailing Address
1629 SE 47 ST
CAPE CORAL FL 33904-8703
US

3. Date Incorporated or Qualified 07/09/1990
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 28 Zip 29 Country 30
4. FEI Number 65-0238536 Applied For Not Applicable
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

9. Name and Address of Current Registered Agent
WRIGHT, DAVID E II
1629 SE 47TH ST
CAPE CORAL FL 33904

10. Name and Address of New Registered Agent
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12 OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	ALEXANDER, DANNY	
STREET ADDRESS	4602 GARY PARKER LN. N.W.	
CITY-ST-ZIP	ST. JAMES CITY FL	
TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	SEAMANS, HENRY J	
STREET ADDRESS	1425 S.E. 30TH TERRACE	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	ALEXANDER, ROBERT	
STREET ADDRESS	4444 ORCHID BLVD	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	ROSENSTERN, FRANK	
STREET ADDRESS	2120 SE 4TH ST.	
CITY-ST-ZIP	CAPE CORAL FL 33900	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	8050 Dickie Dr.
1.4 CITY-ST-ZIP	Jacksonville FL 32216
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	600002156826
2.3 STREET ADDRESS	-04/28/97--01082--036
2.4 CITY-ST-ZIP	***61.25
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	Po Box 16257
4.4 CITY-ST-ZIP	Jacksonville, FL 32445
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	DAVID E WRIGHT II
5.3 STREET ADDRESS	1629 SE 47th St.
5.4 CITY-ST-ZIP	Cape Coral FL 33904
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 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

Handwritten signatures and numbers: 2-76-97 941-547-7770

CR2E037 (9/96)