## 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 #
1. Corporation Name

NAME

STREET ADDRESS

CITY - ST - ZIP

N43943

(2)

CHARIS CHRISTIAN FELLOWSHIP, INC.

FILED	
May 20 1997 8:00am	1
Secretary of State	

#305-235-4471 Daytime Phone # 0032908

Principal Place of Business Mailing Address					-		
12245 SW 132N Miami FL 33186		SUITE 136	13876 SW 56TH STREET SUITE 138		·		
US		MIAMI FL 33175-6021		3. Date Incorporated or Qualified 3a. Date of Last Report			
US				· ·	06/17/1991	02/14/1996	
	ace of Business	2a. Mailing Address		··········	4. FEI Number	Applied For	
	0 SW 129 Ct.	26			65-0418847	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		,	6. Election Campaign Financing	\$5.00 May Be	
23 MiAn		28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution	Added to Fees	
Zip 24 3303	Country 25 U S	Zip	30 Cou	ntry	8. This corporation has liability for i	intangible tax under s. 199.032,  Yes No	
24 550	9. Name and Address of Curre		1901	<del></del>	10. Name and Address of New Re		
				81 Name		<del></del>	
HOI BRO	OK, JOSEPH W			82 Street Ad	idrese (P.O. Box Number Is Not Acceptab	No.	
	W 126 CT	1		OZ SUBBLAG	raress (F.O. Box Number is Not Acceptate		
	ON FL 33032	i		63			
				84 City		85 Zip Code	
						FL T	
11. Pursuant office or r	to the provisions of Sections 617.050 egistered agent, or both, in the State	32 and 617.1508, Florida S e of Florida. Such change :	itatutes, the <b>a</b> t was authorized	ove-named co by the corpor	orporation submits this statement for the pration's board of directors. I hereby accept	ourpose or changing its registered of the appointment as registered	
agent. La	m tamiliar with, and accept the oblig	ations of, Section 617.050	3, Florida Stat	w. Hole	homat	lelon	
SIGNATURE .	Signature typed or pfinted name of registered ag	~ ~ ~			guired when reinstating)	/5/41	
12.		ND DIRECTORS	13.	Apeni spision in	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.170	LE		☐ Change ☐ Addition	
NAME	HOLBROOK, JOSEPH REV.		1.2 N/	ME			
STREET ADDRESS	25505 SW 126TH COURT		1.3 \$1	REET ADDRESS			
CITY - ST - ZIP	PRINCETON FL		1.4 0	TY-ST-ZIP	<u> </u>		
TITLE	D	DELETI	2.1 71	LE	e e	☐ Change ☐ Addition	
NAME	BIGGS, EDWARD		2.2 N/	IME .			
STREET ADDRESS	13870 S.W. 62ND STREET, 1	#101	23 \$1	REET ADDRESS			
CITY-ST-7IP	MIAMI FL			TY-ST-ZIP		[] (b) [] [] (c)	
TITLE	D	☐ DELET	1			Change Addition	
NAME	BUSSE, JIM		3.2 N				
STREET ADDRESS	7451 S.W. 133RD AVENUE			REET ADDRESS			
CITY-ST-ZIP TITLE	MIAMI FL	DELET		TY-ST-ZIP		Change Addition	
NAME	VD Santiago, Hector	E-3 PEECH	4.2 N				
STREET ADORESS	17324 SW 108TH CT.			REET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33157			TY-ST-ZIP			
TITLE	D	DELET				Change Addition	
NAME	BULKLEY. JIM		5.2 N	\ \ \		•	
STREET ADDRESS	6634 SW 114TH PLACE A			REET ADDRESS			
CITY-ST-ZIP	MIAMI FL			TY-ST-ZIP			
TITLE		DELET				☐ Change ☐ 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.