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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N50876** **(4)**

1. Corporation Name

RIVERSIDE AVENUE CHRISTIAN CHURCH (DISCIPLES OF CHRIST), INC.

Principal Place of Business	Mailing Address
2841 RIVERSIDE AVENUE JACKSONVILLE FL 32205	2841 RIVERSIDE AVENUE JACKSONVILLE FL 32205-8228

3. Date Incorporated or Qualified: 09/17/1992
3a. Date of Last Report: 01/29/1996

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / (27)
City & State (23) / (28)
Zip (24) / Country (25) / Zip (29) / Country (30)

4. FEI Number: 59-0917280 ☐ 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

SMITH, DR. JERRY C.
2841 RIVERSIDE AVENUE
JACKSONVILLE FL 32205

10. Name and Address of New Registered Agent

81 Name: Dianne Turner
82 Street Address (P.O. Box Number is Not Acceptable): 2841 Riverside Avenue
83
84 City: Jacksonville FL 85 Zip Code: 32205

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: Dianne Turner — Signature, typed or printed name of registered agent and title if applicable
Dianne Turner, Church Secretary — (NOTE: Registered Agent signature required when reinstating)
April 16, 1997 — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CPD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ALEXANDER, MARK G		1.2 NAME		
STREET ADDRESS	2841 RIVERSIDE AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BROWN, RANDALL		2.2 NAME		
STREET ADDRESS	2841 RIVERSIDE AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY-ST-ZIP		
TITLE	TD	☒ DELETE	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	MURPHREE, BARBARA		3.2 NAME	Bembry, Sharon	
STREET ADDRESS	2841 RIVERSIDE AVE.		3.3 STREET ADDRESS	2841 Riverside Avenue	
CITY-ST-ZIP	JACKSONVILLE FL		3.4 CITY-ST-ZIP	Jacksonville, Florida 32205	
TITLE	SD	☒ DELETE	4.1 TITLE	SD	☒ Change ☐ Addition
NAME	LANCASTER, BARBARA		4.2 NAME	McClure, Corinne	
STREET ADDRESS	2841 RIVERSIDE AVE.		4.3 STREET ADDRESS	2841 Riverside Avenue	
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP	Jacksonville, Florida 32205	
TITLE	SD	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, PERK		5.2 NAME		
STREET ADDRESS	2841 RIVERSIDE AVE.		5.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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: Mark G. Alexander — April 16, 1997 — (904) 798-5467
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone