

FILE NOW: FILING FEE IS \$61.25

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**Jan 27 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N51352 (5)

1. Corporation Name
SUMMERFIELD CHRISTIAN REVIVAL CENTER, INC.



Principal Place of Business 14500 S.E. 73RD AVENUE SUMMERFIELD FL 34492	Mailing Address C/O VICTOR E MULLIN, JR P.O. BOX 153 14500 SE 73 AVE SUMMERFIELD FL 34492 US
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3. Date Incorporated or Qualified 10/20/1992	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
4. FEI Number 59-3150933		

2. Principal Place of Business 21 14500 S.E. 73RD AVE. Suite, Apt. #, etc.	2a. Mailing Address 26 Victor E. Mullin, Jr. Suite, Apt. #, etc.
22 Summerfield, FL City & State	27 P.O. Box 153 14500 S.E. 73 AVE City & State
23 Zip 34492 Country Mation	28 Summerfield, FL Zip 34492 Country Mation

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent MULLIN, VICTOR E., JR. 14500 S.E. 73RD AVE. SUMMERFIELD FL 34492		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE MULLIN, VICTOR E., JR. 14500 S.E. 73RD AVE. SUMMERFIELD 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 V	<input type="checkbox"/> DELETE SANDERS, PRISCILLA J. 2310 N. ROLLING HILL RD. WILDWOOD 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 ST	<input type="checkbox"/> DELETE MULLIN, ESTHER M 14500 S.E. 73RD AVENUE SUMMERFIELD FL 34492	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 D	<input type="checkbox"/> DELETE MULLIN, JERRY E. 14500 S.E. 73RD AVE. SUMMERFIELD 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	<input type="checkbox"/> DELETE MULLIN, DANIEL E. 14500 S.E. 73RD AVE. SUMMERFIELD FL	5.1 TITLE	<input 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 D	<input type="checkbox"/> DELETE COLLIER, JAMES 102 S WARFIELD AVE WILDWOOD FL 34785	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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Victor E. Mullin, Jr. 1-15-98 (352) 347-57

CP2E037 (10/97)