FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

N9300002060 (2)

CHRIST THE ROCK COMMUNITY CHURCH, INC.

Principa	Place	of	Business

Mailing Address

FILED May 20 1997 8:00am Secretary of State



-8642 PINES BL		-8042-PINES-BLVD							
DEMBROKE DIN		-PEMBROKE-PINES FL-99	024-0241						
				3. Date Incorporated or Qualifie 05/04/1993	od 3a. t	3a. Date of Last Report 01/29/1996			
	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
	O Stirling Road	26 11000 Stir)	ing Ro	oad	65-0414663		N	lot Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc. 22 27					I h Certificate of Status Desired I I TTT			Additional Required	
City & State City & State 23 Ft. Lauderdale, FL 28 Ft. Lauderdale, 1			FL	Election Campaign Financing Trust Fund Contribution	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24 33328	Country	Zip 29 33328	Сри 30 і	ntry USA	This corporation has liability Florida Statutes	8. This corporation has liability for intangible tox under s. 199.032, Florida Statutes Yes Y No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
				B1 Name]	
WAGNER, JOHN J 331-3W-95-TER R			į	157	Address (P.O. Box Number is Not Accept 135 N.W. 10 Street	otable)			
PEMBRO	OKE FL 98025			83					
				84 City Pem	broke Pines	FI	L 85 Zip	Code 3028	
11. Pursuant office or re	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and south to oblinate	and 617.1508, Florida Statu If Florida, Such change was	ites, the at	ove-named by the core	corporation submits this statement for the foration's board of directors. I hereby ac	ne purpose scept the ap			
SIGNATURE _	TIT Tairmillar Will is the cool of College	ons or, agenor 617.0303, P	Torica Stati	utes.		41	29/97		
				Agent signature	required when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OR	FICERS AN			
TITLE	D John J. Wagner	DELETE	1.170				Change	☐ Addition	
NAME ATOTET ADODESS	-881-SW-05-TERR-		1.2 NA		15735 N.W. 10 Stree	L			
STREET ADDRESS	PEMBAPKE PINES FL-83025			REET ADDRESS	Pembroke Pines, FL	-			
CITY-ST-ZIP TITLE	D	DELETE	2.1 11	TY-ST-ZIP	remotoke Fines, FL	33020	Change	☐ Addition	
NAME	MARGIE WAGNER		2.2 NA				/		
STREET ADDRESS	1991 OW-95 TERR			REET ADDRESS	15735 N.W. 10 Street	-			
CITY-ST-ZIP	PEMBROKE PINES FL 33025		2 4 0	TY-ST-ZIP	Pembroke Pines, FL				
TITLE	D	☐ DELETE	3170			T. 5	Change	Addition	
NAME	DENNIS RODE		3.2,NA	ME					
STREET ADDRESS	11584 SW 59 CT		3.3 51	reet address					
CITY-ST-ZIP	COOPER CITY FL 33330		3.4 C	TY - ST - ZIP					
TITLE		☐ DELETE	4.1 Til	LE			☐ Change	☐ Addition	
NAME			4. 2 N						
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP		DELETE		IY-ST-ZIP			Change	Addition	
TITLE		C) DITTIE	5.1 ¹ T()				La Change	Addition	
NAME etocet annoecc			5.2 NA						
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS TY-ST-ZIP					
TITLE		DELETE	6.1 TII				Change	Addition	
NAME			6.2 N/						
STREET ADDRESS				reet address					
CITY-ST-ZIP				TY-ST-Z⊮P					
44 1 2 1 2 1					1 1 1 0 0 10 440 0 T(0)(0) E) 11 01			4.11	

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 eath; that I am an officer or director of the corporate or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name achment with an address.