FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

N9300002060 (2)

CHRIST THE ROCK COMMUNITY CHURCH, INC.						
Principal Place of Business Mailing Address					- 1 (40)(191 010 10100 11)(1 84(1) 80(1) 80(1) 80(1) 80(1)	17 8 19 00 11 0 0 1461 0061 1081
11000 STIRLING RD FT LAUDERDALE FL 33328 US 11000 STIRLING RD FT LAUDERDALE FL 33328 US US					3. Date incorporated or Qualified 05/04/1993 4. FEI Number	Applied For
2. Principal Place of Business 2a. Mailing Address					65-0414663 5. Certificate of Status Desired	\$8.75 Additional
21 26						Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State	 , '		7. Is this nonprofit corporation a homeowners association?	
Zip 24	Country 25	Zip	Country 30		8. This corporation owes or has paid the current Personal Property Tex due June 30.	t year lotangible
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
81						
WAGNER, JOHN J			82 8	Street Addre	ss (P.O. Box Number is Not Acceptable)	
15735 NW 10 ST PEMBROKE FL 33028			83			
r Calibrio	TIL IL SSUEO		84 (City		ne Zin Codo
			. [1]	·	トレ	35 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.0503. 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						
			13.	agnature required	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12
TITLE			1.1 TITLE			Change
NAME	JOHN J. WAGNER		1,2 NAME	- 1		
STREET ADDRESS	15735 NW 10 ST		1.3 STREET AD	DRESS		
CITY-ST-ZIP	BELIDBOUR DIVIES EL		1.4 CITY-ST-Z	nP		
TITLE			2.1 TIFLE			Change
NAME	MARGIE WAGNER 22N		2.2 NAME			
STREET ADDRESS			2.3 STREET ADI	DRESS		
CITY-ST-ZIP	PEMBROKE PINES FL		2. 4 CITY-ST-2	ZIP		
TITLE	D	DELETE	3.1 TITLE			Change
NAME	DENNIS RODE		3.2 NAME			
STREET ADDRESS	11564 SW 59 CT		3.3 STREET ADI	DRESS		
CITY-ST-ZIP	COOPER CITY FL 33330		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		ليا	Change
NAME			4. 2 NAME	ļ		
STREET ADDRESS			4.3 STREET ADD	1		
CITY-ST-ZIP		T beleve	4.4 CITY-ST-Z	IP		Change Address
TITLE			5.1 TITLE	1		Change
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADD			
CITY-ST-ZIP		T DELETE	5.4 CITY-ST-Z	IP		Change Addition

14. I 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; own an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 26 1998 8:00am

Secretary of State