

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

May 10, 2000 08:00 AM
Secretary of State

DOCUMENT # N93000002060

1. Entity Name
 CHRIST THE ROCK COMMUNITY CHURCH, INC.

Principal Place of Business 11000 STIRLING RD FT LAUDERDALE 33328	Mailing Address 11000 STIRLING RD FT LAUDERDALE 33328
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2. Principal Place of Business 11000 STIRLING RD	3. Mailing Address 11000 STIRLING RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State COOPER CITY FL	City & State COOPER CITY FL
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Zip 33328	Country US	Zip 33328	Country US
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4. FEI Number 65-0414663	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WAGNER JOHN J
 15735 NW 10 ST
 PEMBROKE FL
 33028 US

7. Name and Address of New Registered Agent

Name
WAGNER JOHN J
 Street Address (P.O. Box Number is Not Acceptable)
 11000 STIRLING ROAD
 City
COOPER CITY FL Zip Code
33328

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE _____ DATE **05/10/2000**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00** May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BROWN WYATT A 1610 REID SCHOOL ROAD TAYLORS SC 29687
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PETROW JAMES 306 BEAVER RUN DR NAZARETH PA 18064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CORDERO RAUL 11000 STIRLING ROAD COOPER CITY FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition WAGNER MARGIE 11000 STIRLING ROAD COOPER CITY FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition WAGNER JOHN J 11000 STIRLING ROAD COOPER CITY FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.