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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N94000000316 (9)

1. Corporation Name
CLERMONT BIBLE CHURCH, INC.



Principal Place of Business
1005 AUTUMN LEAF DR.
WINTER GARDEN FL 34787

Mailing Address
P.O. BOX 121281
CLERMONT FL 34712-1281

3. Date Incorporated or Qualified 01/20/1994
3a. Date of Last Report 04/10/1996

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number 59-3154708
Applied For Not Applicable

Suite, Apt #, etc.
22

Suite, Apt #, etc.
27

5. Certificate of Status Desired \$8.75 Additional Fee Required

City & State
23

City & State
28

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

Zip Country
24 25

Zip Country
29 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WRIGHT, LYNN W
600 G. BILLARD ST.
WINTER GARDEN FL 34777

81 Name Wright, Lynn W.
82 Street Address (P.O. Box Number is Not Acceptable) 2716 New Circle Suite 102
83
84 City Ocoee FL 85 Zip Code 34761

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 of 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 *Lynn W. Wright* DATE Feb 28, 1997
Signature of registered agent and title if applicable. (NOTE Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
T WALKER, EVA A 414 S. LAKEVIEW AVE. WINTER GARDEN FL 34787	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
S JOHNSON, JANE 2720 EMPIRE CHURCH RD. GROVELAND FL 34736	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P BEKEMEYER, JON D 1005 AUTUMN LEAF DR. WINTER GARDEN FL 34787	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D BANNER, BOB 1208 RUSSELL DRIVE OCOEE FL	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D HALL, RICHARD 20417 S BUCKHILL ROAD CLERMONT FL	<input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D HITE, SIDNEY 11340 HOWEY CROSS ROAD CLERMONT FL	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

D
West, Tony
7325 South Fork Ranch Road
Clermont, FL 34711

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: *Jon D. Bekemeyer* DATE 2-28-97 (407) 656-2863
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0069848

CR2E037 (9/96)