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Feb 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N96000004187 (8)

1. Corporation Name
ISLAND COMMUNITY CHURCH OF MERRITT ISLAND, INC.



Principal Place of Business Mailing Address
1000 N. BANANA RIVER DR. MERRITT ISLAND FL 32952
1000 N. BANANA RIVER DR. MERRITT ISLAND FL 32952-4702

3. Date Incorporated or Qualified 08/08/1996
3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 25 29 30
4. FEI Number EIN 59-3402889 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
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

TIER, MICHAEL
1000 N. BANANA RIVER DR.
MERRITT ISLAND FL 32952

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 MICHAEL M. TIER
Signature, typed or printed name of registered agent and title if applicable.

1-29-97
DATE

12. OFFICERS AND DIRECTORS
TITLE D Chairman of Deacons DELETE
NAME Paul Hoskins
STREET ADDRESS 445 Albatross
CITY-ST-ZIP Merritt Island, Fl 32952
TITLE D Secretary DELETE
NAME D. Hope Hoskins
STREET ADDRESS 445 Albatross
CITY-ST-ZIP Merritt Island, Fl 32952
TITLE D Treasurer DELETE
NAME Donna Edwards
STREET ADDRESS 1740 Shelter Trail
CITY-ST-ZIP Merritt Island, Fl 32952
TITLE D Pastor DELETE
NAME Michael M. Tier
STREET ADDRESS 3360 Primrose Lane
CITY-ST-ZIP Mims, Fl 32754
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: Michael M. Tier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-97
Date Daytime Phone # 0020065

CR2E037 (9/96)