FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # N9600004467 (4)

FRONTLINES CHURCH, INC.

FILED Feb 18 1997 8:00am Secretary of State



Principal Place of Business Mailing Address						# IMBILITMI MIN INIIN MILLI NOLLI MULLI	hanii aakii aal	15 81811 91919 8	ithir had i ban
633 OAKWOOD TITUSVILLE FL	PLACE 32780	633 OAKWOOD PLACE TITUSVILLE FL 32780-7151							
						3. Date Incorporated or Qualified 08/27/1996	3a. Da	te of Last Re	eport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				57-7401005			t Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State	е	City & State			6. Election Campaign Financing	_	\$5.00		
23]	Country	28	Cou	intry		Trust Fund Contribution		Added t	
Zip	Country	Zip 29	30	iritry		8. This corporation has liability for Florida Statutes		tax under s.] No	199.032,
24	25 9. Name and Address of Curren		[30]			10. Name and Address of New Re			·····
				81	Name				
MERWIN) TIM		'		Chart Add	con (D.O. Boy Number to Not Assente	blo)		
633 OAKWOOD PLACE			:	62	Street Addi	ress (P.O. Box Number is Not Accepta	נסונ		
***	LLE FL 32780			63					
				84	City		FL	85 Zip (Code
11 Pursuant	to the provisions of Sections 617 050	2 and 617 1508 Florida Statu	tes the a	have	a-named corr	poretion submits this statement for the		changing it	s registered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig-	of Florida. Such change was ations of, Section 617.0503, Fl	authorize lorida Stat	d by tutes	the corporation.	poration submits this statement for the tion's board of directors. I hereby acce	pt the appo	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title it applicable (NO	TE: Danistere	d Ana	ent elocelike recui	red when reinstating)	DATE		
12.	OFFICERS AN		13,	U ~Q0	an signature redu	ADDITIONS/CHANGES TO OFFI		DIRECTOR	IS IN 12
TITLE	D	DELETE	1.1 T)	ĭL€	Т			Change	Addition
NAME	MERWIN, TIM		1.2 N	AME					
STREET ADDRESS	633 OAKWOOD PLACE		1.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	TITUSVILLE FL 32780		1.4 C	TY-S	T- ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE	D	DELETE	2.1 1	TLE				Change	Addition
NAME	MERWIN, LARRY		2.2 N	AME					
STREET ADDRESS	403 HIGHWAY A1A #211		2.3 S	FREET	ADDRESS	W.	40.04		
CITY-ST-ZIP	SATELLITE BEACH FL 32937	☐ DELETE			ST-ZIP				
TITLE	D	3.1 Ti	TLE				Change	Addition Addition	
NAME	COX, JAMES		3,2 N	AME					
STREET ADDRESS	4385 CAMBERLY COURT		3,3 \$	3.3 STREET ADDRESS					
CITY-ST-ZIP	COCOA FL 32927			3.4. CITY-ST-ZIP				TTOhnan	Addition
TITLE								Change	Addition
NAME	PAPPADEAS, JIM		4.26		4000000		•		
STREET ADDRESS	6513 HULDEN KUAD		1		ADORESS				
CITY-ST-ZIP TITLE	COCOA FL 32927	DELETE			T-ZIP			Change	Addition
NAME	Bank Din	· · · · · · · · · · · · · · · · · · ·		5.1 TITLE 5.2 NAME				Change	had required)
STREET ADDRESS	THIKICK, MICH	1005			ANDRESS		•		
CITY-ST-ZIP	5220 MHILE O	S220 MAILE ONE OF		5.3 STREET ADDRESS 5.4 City-St-Zip					
TITLE	D - I HOIVIGE	DELETE	6.1 Ti		01 - KIF			Change	Addition
NAME	ANDIS KEN	had becall	6.2 N						- 12017/01
STREET ADDRESS	() () () () ()	CIRCLE			ADDRESS	•			
CITY-ST-ZIP	T.T. SVILLE F	Secretary of	76 6.4 C						
		d with this filing does not qual				d in Section 119.07(3)(i). Florida Statute	as. I further	pertify that	the

. 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 of suppliemental 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 corporation or the receiver or truetee 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

JANUARY 211977

407/779-3242