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Jun 03 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 # N96000005988 (8)

1. Corporation Name

CHRIST CARES ALLIANCE CHURCH INC.



Principal Place of Business

Mailing Address

ARLINGTON CENTER BLDG. B
6501 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32211

ARLINGTON CENTER BLDG. B
6501 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32211-5779

3. Date Incorporated or Qualified
11/25/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

22 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-3037712

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

RAÑOLA, ROTHAPEL E
7061 PRELLIE ST.
JACKSONVILLE FL 32210

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

[Signature]

Rev. Rothapel E. Rañola-Pastor

4/12/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE T
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Board Chairman "T" Change Addition
Dr. Daniel Bunyi
5617 Ft. Sumter Rd.
Jacksonville, FL 32210

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE T
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Elder "T" Change Addition
Dr. Lysandro Tapnio
3264 Brachenbury Ln.
Jacksonville, FL 32225

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE T
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Elder "T" Change Addition
Jose Dagdayan
12619 Barnbury Ct.
Jacksonville, FL 32246

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE T
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Deacon "T" Change Addition
Ernesto Arceo
3818 Mission Hills Dr. E.
Jacksonville, FL 32225

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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]

(904) 570-5200

CR2E037 (9/96)