FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 544063

(1)

Mailing Address

CHRISTIAN PROPERTIES, INC.

FILED										
Mar 31 1997 8:00am										
Secretary of State										

106 HARBOR W P. O. BOX 1465 AUBURNDALE F	5	P. O. BOX 1485 AUBURNDALE FL 33823-144 US	65				
US					 Date Incorporated or Qualified 09/01/1977 	3a. Date of La 02/11/199	
2. Principal Pi	iace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-1762215		Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23	е	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Ζφ 24	Country 25	7ιρ 29	Countr 30	у	8. This corporation has liability for in Florida Statutes	ntangible tax und Yes 🏻 No	er s. 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Reg	Jistered Agent	
CHR	ISTIAN, CECIL B.		81	Name		•	
106 HARBOR WAY AUBURNDALE FL 33823				Street Add	dress (P.O. Box Number is Not Acceptab	le)	
			83				
			84	City		FL 85	Zip Code
office or r		ate of Florida. Such change was a	authorized b	v the corpora	poration submits this statement for the pation's board of directors. I hereby accep		
SIGNATURE	Stgoarine type that printed name of registered	some and little if anolicable (NOT)	F Registered Ad	ant signature renu	uired when reinstating)	DATE	
12.	·	AND DIRECTORS	13.	Jork organisto rego	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TOLE	8	☐ DELETE	1.1 TITLE			☐ Char	
MAME	CHRISTIAN, LINDA M	_	1.2 NAME	1			
STREET ADDRESS	106 HARBOR WAY			T ADDRESS			ĺ
	AUBURNDALE, FL 00000						
CITY - S1 - ZiP TITLE	p	DELETE	1.4 CITY - 2.1 TITLE	21.54		☐ Char	ige Addition
1	CHRISTIAN, CECIL B		2.2 NAME				
NAME	106 HARBOR WAY						
STREET ADDRESS	AUBURNDALE, FL 00000			T ADDRESS			
(:11Y+S1+7IP	AUDONINDALE, I E 00000	DELETE	2 4 City 31 Title	-81-212	· · · · · · · · · · · · · · · · · · ·	Char	nge Addition
TIME		Ш рессте	4			VIIII	ige reconton
NAME			3.2 NAME	ŀ			ţ
STIFFET ADDRESS				T ADDRESS			
CHY-ST-7iP		Driete	3 4. CITY			[] AL-	Addition
TITLE		☐ DELETE	4.1 TITLE	j		L_j Char	nge L_ Addition
NAME			4. 2 NAM	1			1
STREET ADDRESS			4.3 STREI	T ADDRESS			
COY-ST-ZIF			4.4 CITY-	ST-ZIP			
TILLE		DELETE	5.1 TITLE			Char	nge 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CHY-S1-7IF			5.4 CITY-	ST-ZIP			
HIE		☐ DELETE	6.1 TITLE			☐ Char	nge Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CHY-S1-7-P			6.4 CITY-	ST-ZIP			
	by cortdy that the information curve	had with this filing does not quali			ed in Section 119 07/3\(ii) Florida Statute	e I further certifu	that the

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 constraint or the receiver or trustee or powerful to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an all admired with an address.

CECLE B. CHELSTIAN

SIGNATURE

NATURE AND TYPED ON PRINTED IN ME OF SIGNING OFFICER OR DIRECTOR

3/26/96 44/9676530