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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 700172

1. Corporation Name

(0)

CIDOT	CHDICTIAN	CHILDCH O	F TITUSVILLE.	INC
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Principal Place	of Business	Mailing Address					u siun diun diu ff	71 8 13 01011 61011 1001	ļ
2880 JAY JAY ROAD PO BOX 164 TITUSVILLE FL 32781		2880 JAY JAY ROAD PO BOX 164 TITUSVILLE FL 32781	PO BOX 164						
						3. Date Incorporated or Qualified 11/19/1959	3a. Date of t 01/30	ast Report 0 /1995	
Principal Place of Business		2a. Mailing Address 26				4. FEI Number 59-1724419	}	Applied For Not Applicat	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	, , , , , ,	.75 Additional	
City & State		City & State		Election Campaign Financing		ee Required May Be			
23		28				Trust Fund Contribution		dded to Fees	
Z(p 24	Country 25	Zip	Zip Cour 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Solve No.		
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re	gistered Agent		
				81	Name				
WATTWOOD JR,H E			ŀ	82	Street Add	iress (P.O. Box Number is Not Acceptable)		_
1010 LAI P O BOX			}	83					
	LE FL 32780		-	84	City		85	Zip Code	
					Oily		FL 👸	21p 00d6	
or registers		rida. Such change was authorize	ed by the c			ration submits this statement for the purpor ard of directors. I hereby accept the appoir			
SIGNATURE _	Signature, typed or printed name of registered age	inLand title if an olicanie (NO	TE: Registered	 Aaeni	l signature requin	ed when reinstating)	DATE		
12.	*	ND DIRECTORS	13.			, ADDITIONS/CHANGES TO OFFIC		CTORS IN 12	
FIFLE	D	DELETE	1.1 TIT	LE		C/P	K Cha	 	ın
NAME	BACKUS, W.		1.2 NA	ME		BACKUS, W			
STREET ADORESS	2981 CRYSTAL CT		1 3 ST	REET	ADDRESS	2981 CRYSTAL CT			
CITY - ST - ZIP	TITUSVILLE FL		1.4.01	Y-S	T-ZIP	TITUSVILLE, FL	*****	<u>.</u>	
TITLE	C	□ DÉLÉTE	2 1 TIT	LF		D	₹ Cha	nge 🔲 Addition	'n
NAME	FEASTER, T.		22 NA	ME		FEASTER, T.			
STREET ADORESS	2173 KINGS CROSS		3		ADDRESS	2173 KINGS CROSS			
CITY - ST - ZIP	TITUSVILLE FL		2 4 C+		ST - Z IP	TITUSVILLE, FL			
TITLE	D	DEFELE	3 1 TIT				Chai	nge 🔲 Addition	n
NAME OTOGET ADDOGEO	MCDOLE, H.		3 2 NA		1000000				
STREET ADORESS	1295 NOVA TERRACE TITUSVILLE FL		-		ADDRESS				
CITY-ST-ZIP TITLE	T T	DELETE	3.4 CI	_	ST - ZIP		™ Cha	nge 🔲 Addition	
NAME	RATLIFF.S		4 2 NA			T/D	(ES Orial	ige E Add-side	"
STHEEL ADDRESS	2615 BAYWOOD DR.				ADDRESS	RATLIFF, S			
CITY-ST-ZIP	TITUSVILLE FL		4 4 CiT			2615 Baywood Dr.			
TITLE	S	DELETE	5 1 TIT		1-215	Titusvile, Fl	⊠ Chai	nge 🔲 Addition	н Н
NAME	WATTWOOD, H.E. J		5 2 NA			S/D	<u> </u>	a. <u></u>	
STREET ADDRESS	1010 LANE AVE				ADDRESS	Wattwood, H.E., JR.			
CITY-ST-ZIP	TITUSVILLE FL		5464			1010 Lane Ave.			
TITLE		DELETE	61 TIT		-	Titusville, Fl	☐ Chai	nge 🔲 Addition	n)
NAME			62 NA						
STREET ADDRESS					ADDRESS				
CITY - ST - ZIF			6.4 CIT		į				
	certify that the information supplied	d with this filing is voluntarily furn				for the exemption stated in Section 119.03	7(3)(k). Florida S	latutes. I further	

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING SEFIGER OF DIRECTOR

02-05-96 (407)267-2704

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