Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 702155

CENTRAL CHRISTIAN CHURCH OF DADE COUNTY, FLORIDA

Country

Principal Place of Business 222 MENORES AVE CORAL GABLES FL 33134

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

Mailing Address

222 MENORES AVE CORAL GABLES FL 33134

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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FILED Mar 01, 1999 8:00 am § Secretary of State

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3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

03/16/1974

59-1612313

4: FEI Number

Signature, Upped or printed named of registered appear and tills if applicables. (IACTE: Registered Appear superused Appear s	24	25		29		0				Trust Fund					aged to	Fees
SHAW, VIRGIE LEE 3111 ANDERSON ROAD CORAL GABLES FL 33134 B4 City FL ST ZIP Code 44 City FL ST ZIP Code 45 City FL ST ZIP Code 45 City FL ST ZIP Code 46 City FL ST ZIP Code 46 City FL ST ZIP Code 47 City FL ST ZIP Code 48 City FL ST ZIP FL ST ZIP Code 48 City	Name and Address of Current Registered Agent															
311 ANDERSON ROAD CORAL GABLES FL 33134 A						81		Name						•		•
311 ANDERSON ROAD CORAL GABLES FL 33134 A	SHAW VIRGIE I FE				82	١,	Street Add	ress (P.	O. Box Nu	mber is Ne	ot Accept	able)				
Sacron S	,			-	Ι`						,	1				
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 and accept the obligations of, Section 617.0502 and accept the obligations of, Section 617.0503 chautes. International continues of registered agent and the if applicable. (NOTE Registered Agent signature required when rentative) DATE				83	Γ		:	-			*					
IT. Pursuant to the provisions of Sections 617.0502 and 637.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered disposed agent and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered by the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered as authorized by the corporation's board of directors. I hereby accept the appointment as registered as authorized by the corporation's board of directors. I hereby accept the appointment as registered as authorized by the corporation's board of directors. I hereby accept the appointment as registered as authorized by the corporation's board of directors. I hereby accept the appointment as registered as authorized by the corporation's board of directors. I hereby accept the appointment as registered was authorized by the corporation's board of directors. I hereby accept the appointment as registered was authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby a	CONAL OF	MDLES FE 3313	7				L							· .	7:- 0	
Pursuant to the provisions of Sections 617,0502 and 617,1508, Findfad 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 Findfa. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 617,0003, Florida Statutes. Common temperature of registered agent and size it applicable. (NOTE Registered Agent signature registered agent agent agent agent agent agent and accept the obligations of, Section 617,0003, Florida Statutes. (NOTE Registered Agent signature registered or should be composed as a possible statutes. (NOTE Registered Agent signature registered agent signature registered agent agent signature registered agent agent signature registered or should sho						84	1	City					FI	85	ZIP C	ode ·
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Goard or directors. I nerety accept the appointment as registered agent agent. Lam familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title 4 spotiability. (NOTE: Requirement Agent algorithm required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. CARY G. HARRIS / CARY G. HARRIS / CARY G. HARRIS / CORAL GABLES FL 1.3 TITLE 1.2 LAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.3 TITLE 1.2 Change Addition WARRIER ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. CORAL GABLES FL 1.4 CITY-ST-ZIP THE CARY G. HARRIS / CORAL GABLES FL 1.4 CITY-ST-ZIP CORAL GABLES FL 1.4 CITY-ST-ZIP CORAL GABLES FL 1.4 CITY-ST-ZIP CORAL GABLES FL 3.1 TITLE 1.2 Change Addition Addition ARRISON, BETTY 3.3 STREET ADDRESS 4.4 CITY-ST-ZIP CORAL GABLES FL 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CORAL GABLES FL 3.5 STREET ADDRESS 3.5 STREET ADDRESS CORAL GABLES FL 3.6 STREET ADDRESS 3.7 STREET ADDRESS 4.4 CITY-ST-ZIP CORAL GABLES FL 3.5 STREET ADDRESS 3.5 STREET ADDRESS 4.5 STREET A	11 Dureuant	to the provisions	of Sections 617 05	502 and 617 1508	Florida Statutes	the above	! e-n	named con	poration	submits th	is stateme	nt for the	DUIDOSA O	f changi	ng its r	egistered
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14. I 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	14. I hereby o	certify that the info	ormation supplied	with this filing does	s not qualify for the	ne exempti	ion t m	stated in	Section	119.07(3)(nave the ≈	i), Florida	Statutes.	I further ce f made und	rtify that ler oath:	t the in that I	tormation am an

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officer or director of the corporation or the receiver of values 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 one of the corporation or the receiver of values 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 one of the corporation of the receiver of values empowered.

SIGNATURE: