## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

PALO ALTO CHURCH OF CHRIST INC

## **FILED** Feb 16 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						il ateli bieli biëli iesi	
3119 HWY 231 PANAMA CITY		P O BOX 906 PANAMA CITY FL 32402			3. Date Incorporated or Qualified		
US		US			03/30/1961		
					4. FEI Number	Applied For	
2. Principal P	lace of Business	2a. Mailing Address		<del></del>	59-1701205	Not Applicable	
21		26			5. Certificate of Status Desired	8.75 Additional Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc.					6. Election Campaign Financing \$	5.00 May Be	
		27	27			Added to Fees	
City & State City & State					7. Is this nonprofit corporation a homeowners ass		
23 Zin			Pip Country		☐ Yes ☐ No		
24	25	29 30		utry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent			<u> 30 </u>	Personal Property Tax due June 30.			
					81 Name		
TUGGLE, RICHARD							
755 ROSEMONT				82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
PANAMA CITY FL 32405				83			
			ļ			T	
ŀ				84 City	FL <sup>85</sup>	i 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 hoard 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE							
12.		AND DIRECTORS	13.	When siburation techn	ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS IN 12	
TITLE	D	DELETE	1.1 10	LE		Change Addition	
NAME	Harrison, w Gerald		1.2 NA	ME			
STREET ADDRESS	379 BUNKERS COVE RD		1.3 \$11	REET ADDRESS			
CITY-ST-ZIP	PANAMA CITY, FL 00000		1.4 CIT	Y-ST-ZIP			
TITLE	TD	☐ DELETE	2.1 TIT	LE		Change	
NAME	TUGGLE, RICHARD		2.2 NA	ME			
STREET ADDRESS	755 ROSEMONT DR		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	PANAMA CITY, FL 00000			TY-ST-ZIP			
TITLE	D D	☐ DELETE	3.1 TIT	-		Change	
NAME	KELLER, JOE		3.2 NA				
STREET ADDRESS	116 BUNKERS COVE RD. PANAMA CITY FL			REET ADORESS			
CITY-ST-ZIP TITLE	D	DELETE	3.4. CF 4.1 TIT	Y-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	
NAME	JOHN L JOHNSON		4. 2 NA	I	۵.	A LEGISTRA	
STREET ADDRESS	3116 SARASOTA AVE			REET ADDRESS			
CITY-ST-ZIP	PANAMA CITY FL			Y-ST-ZIP		ļ	
TITLE		DELETE	5.1 TIT			Change	
NAME			5.2 NA	1		"	
STREET ADDRESS			5.3 STF	LEET ADDRESS			
CITY-ST-ZIP			1	Y-ST-ZIP			
TITLE	, , ,	DELETE	6.1 TIT			Change	
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 STA	EET ADDRESS			
CITY-ST-ZIP			64 CIT	Y-ST-71P		į.	

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 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 13 if changed, or on an attachypent synthypen address.