FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 18 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703735

(1)

Mailing Address

INTERCESSION CHRISTIAN SCHOOLS, INC.

22 S. JOHN STREET ORLANDO FL 32835 US		22 S. JOHN STREET ORLANDO FL 32835-1454 US		3. Date Incorporated or Qualified 03/16/1962	3a. Date of Last Report 03/26/1996
Principal Place of Business 2a. Mailing Address		2a. Mailing Address		4. FEI Number	Applied For
21 26		26		59-1022051	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		8. Election Campaign Financing Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip	Country 30	8. This corporation has tiability for it	ntangible tax under s. 199.032, Yes D No
24]	9. Name and Address of Curren		301	10. Name and Address of New Reg	
HAYS, RONALD REV 22S. JOHN STREET ORLANDO FL 32835 83 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 regist 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 registe agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
agent. I am familiar wilth, 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.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PM	DELETE	1.1 TITLE		Change Addition
NAME	HAYS, RONALD REV		1.2 NAME		
STREET ADDRESS	22 S. JOHN STREET		1.3 STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL 32835		1.4 CITY - ST - ZIP		
TITLE	DT	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	COOPER, JAMES REV		2.2 NAME		
STREET ADDRESS	161 S. ORANGE AVE		2.3 STREET ADDRESS		
CITY - ST - ZIP	ORANGE CITY FL		2.4 CITY-ST-ZIP		
TITLE	DT	DELETE	3.1 TITLE	D7 0 10	Change Addition
NAME	GAGNON, PAUL REV.		3.2 NAME	Gagner, Paul Rev. 11455 Elim Lane Hobe Sound, FL 3345	
STREET ADDRESS	140 CR 17-A NORTH, LOT 47	1	3.3 STREET ADDRESS	11455 Elim Lane	
CITY-ST-ZIP	AVON PARK FL		3.4. CITY-ST-ZIP	Hobe Sound, FL 3345	5
TITLE	DST	☐ DELETE	4.1 TITLE	1	Change Addition
NAME	SMALLEY, MICHAEL REV		4. 2 NAME		
STREET ADDRESS	213 N. PARSONS AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	SEFFNER FL	DELETE	4.4 CITY-ST-ZIP	l- 	Change L Addition
TITLE	A UIOLIT IONES DEV	(DETELE	5.1 TITLE	A the Photogram	FE CHANGE FE ADDITION
NAME	HIGHT JONES REV.		5.2 NAME	Walker, nobert heu	ul.
STREET ADDRESS	1026 41ST ST		5.3 STREET ADDRESS	Walker, Robert Rev 3485 Dr. M.L. King 81 Ft. Myers, Ft 3391	• •
C(TY - ST - ZIP	SARASOTA FL	☐ DELETE	5.4 CITY - ST - ZIP	TV. ///yers, 72 334/	Change Addition
TITLE	A LENGED DUNID DEV	C DETCIE	6.1 TITLE	}	Fi custifie Fi Vocition
NAME Expert Apperer	Ledger, Philip Rev. 3985 DR M.L. King BLVD		6.2 NAME	ì	
STREET ADDRESS	FT MYERS FL		6.3 STREET ADDRESS	1	
City-St-ZiP		d with this filing does not qualify	6.4 CITY-ST-ZIP	stated in Section 119.07(3)(i), Florida Statute	s. 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.					