FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

SUNTREE CHURCH OF CHRIST, INC.

Principal Place of Business Mailing Address							IBI BIBII BIBII BIJ) 	4H 01011 1901
104 NE THIRD SATTELLITE BE US		104 N.E. 3RD STREET SATTELITE BEACH FL 32937-2077 US							
						3. Date Incorporated or Qualified 08/28/1962	3a. Date of 04/3	Last Re 26/19	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	plied For
Suite, Apt	# Ala	26			59-6146026	- A		t Applicable	
Jone, Apr	#, etc	27 Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1901	3.75 A Fee Re	Additional
City & State	3	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip		ountry		8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30 9. Name and Address of Current Registered Agent		30		Florida Statutes Yes W No 10. Name and Address of New Registered Agent				
9. Name and Address of Current Registered Agent					lame	10. Name and Address of New Heg	istered Agen	<u>. </u>	
MEREDITH, HAROLD L.]						
411 GR/			82 Street Ac		areet Addres	ss (P.O. Box Number is Not Acceptable	a)		
	TE BEACH FL 32937		Ì	83			,		
			ŀ	84 C	City		- 85	Zip C	`nde
44 6	10 4 07 070			. -	-		FLI	1	
office or n	to the provisions of Sections 612,050 egistered agent, or both, in the State in familiar with, and accept the oblig	int Florida. Such channa was a	authorizac	l hu th	amed corpor e corporation	ration submits this statement for the punis board of directors. I hereby accept	rpose of char the appointm	iging its ient as	registered registered
SIGNATURE _									
Signature typed or printed name of registered agent and title if applicable. (NOTE: Register 12. OFFICERS AND DIRECTORS 13				Agent si	ignature required	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	CCTOR	C IN 10
TITLE	SD	DELETE	1.1 TiT	LE		ADDITIONS/CHANGES TO OFFICE		Change	Addition
NAME	DYKES, ROBERT	_	1.2 NA						
STREET ADDRESS	1472 WINDWARD DR		1.3 ST	REET ADD	ORESS				
CITY-ST-ZIP	MELBOURNE FL		1.4 CI1	Y-ST-ZI	IP				
TITLE	DP	DELETE	2.1 TIT	LE				Change	Addition
NAME	MEREDITH, HAROLD		2.2 NA	ME					
STREET ADDRESS	421 PENGUIN DR		2.3 STI	REET ACK	DRESS				
CITY-S1-ZIP	SATELLITE BCH, FL 00000	DELETE		TY-ST-Z	IP .			·h	Addition
TITLE NAME	DV Meredith, David	ר הנונונ	3.1 TIT 3.2 NA					Change	☐ Addition
STREET ADDRESS	2164 D AVE			me Reet ade	RESS				
CITY-S1-ZIP	W. MELBOURNE FL			TY-ST-Z					
TITLE	1	DELETE	4.1 TIT					hange	Addition
NAME	WERNER, WILLIAM		4. 2 NA	ME					
STREET ADDRESS	2690 CHAPPARAL DR		4.3 STI	REET ADD	PRESS				
CITY-ST-2IP	MELBOURNE FL		4.4 CIT	Y-ST-21	Р				
TITLE	DV	☐ DELETE	51 TIT	LE				hange	Addition
NAME	BILLY E. YARBROUGH		52 NA	ME					
STREET ADDRESS	325 OAKLAND AVE		5.3 ST	REET ADD	PRESS				
CITY-ST-ZIP	INDIALANTIC F		5.4 CIT	Y-ST-ZI	P		*····		
THE	DV	☐ DELETE	6.1 TIT					hange	Addition
NAME	ANDERSON, NELSON J		6.2 NA						
STREET ADDRESS			1	6.3 STREET ADDRESS					
CITY-SI-ZIP	MELBOURNE FL		6.4 CIT	Y-ST-Z)	P				1

SIGNATURE: &

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 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:

2/16/97

FILED

Feb 25 1997 8:00am

Secretary of State