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Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 705616 (1)

1. Corporation Name

FIRST CHRISTIAN CHURCH OF WEST PALM BEACH, INCOR PORATED

Principal Place of Business	Mailing Address
215 SOUTH CONGRESS AVE WEST PALM BEACH FL 33409 US	215 SOUTH CONGRESS WEST PALM BEACH FL 33409 US

3. Date Incorporated or Qualified: 05/15/1963

4. FEI Number: 59-6187790 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No NA

9. Name and Address of Current Registered Agent

GLENN D. KELLEY
886 FOREST GLEN LANE
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

61 Name

62 Street Address (P.O. Box Number is Not Acceptable)

63

64 City **FL** 65 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 board 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	T	☒ DELETE	1.1 TITLE	T	☐ Change ☒ Addition
NAME	VAN WAY, JOHN		1.2 NAME	Scott, Charlotte	
STREET ADDRESS	1710 19TH AVE. N		1.3 STREET ADDRESS	2937 Chickamauga Avenue	
CITY-ST-ZIP	LAKE WORTH FL		1.4 CITY-ST-ZIP	West Palm Beach, FL 33409	
TITLE	T	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HERTEL, ANDREW		2.2 NAME		
STREET ADDRESS	8541 7TH PLACE S		2.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BCH. FL		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GEORGE, FRED		3.2 NAME		
STREET ADDRESS	5212 BETHANY LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BCH. FL		3.4 CITY-ST-ZIP		
TITLE	DC	☐ DELETE	4.1 TITLE	P	☒ Change ☐ Addition
NAME	JONES, LOUISE		4.2 NAME		
STREET ADDRESS	709 HIGHLAND		4.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		4.4 CITY-ST-ZIP		
TITLE	P	☒ DELETE	5.1 TITLE	DC	☐ Change ☒ Addition
NAME	KELLEY, GLENN		5.2 NAME	Groelle, Bob	
STREET ADDRESS	886 FOREST GLEN LANE		5.3 STREET ADDRESS	879 Lemongrass Lane	
CITY-ST-ZIP	WEST PALM BCH FL		5.4 CITY-ST-ZIP	West Palm Beach, FL 33414	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] ROBERT C. GROELLE 2/26/98 561/683-8811