FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998 **DOCUMENT** #

Principal Place of Business

2103 NW 36TH TERRACE

Suite, Apt. #, etc.

22

GAINESVILLE FL 32005-3631

2. Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra 3. Mortham

Secretary of State DIVISION OF CORPORATIONS

708057 (5)CHILD EVANGELISM FELLOWSHIP OF ALACHUA COUNTY, I

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

2103 NW 36TH TERRACE

GAINESVILLE FL 32605-3631

FILED Apr 06 1998 8:00am Secretary of State

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Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

11/03/1964

59-1000180

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

City & Stal	t e			City & State				7. Is this nonprofit corporation a homeowners association?				
Zip		1	Country	Zip	<u> </u>	Cou	intry		This corporation owes or has paid the current year intangible			
24 25			29	├ ──			Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent												
81 NameCD Patrick McDonald												
NORTHAM, DELMER								62 Street Address (P.O. Box Number is Not Acceptable)				
5642 SILVER SANDS CIRCLE BOX1694							1202 OL 31 31					
KEYSTONE HEIGHTS FL 32656							Gainesville, FL 32601					
							84 City 85 Zip Code.					
							Gainesville, FL 32601					
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												
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE												
12.	CD		OFFICERS AND	DIRECTOR	DELETE	13. 1.1 Ti		T	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 K Change			
NAME		AM	DELMER		L DECEIE	1.1 II 12 N		CD				
14.4%				1				l Pai	rtick McDonald			
STREET ADDRESS	56 SILVER SANDS CIRCLE NA KEYSTONE HEIGHTS FL 32656-1694						REET ADDRESS TY-ST-ZIP	rtick_McDonald 2 SE 51.St				
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NAME		1 4 1 F	, PATRICK		J. Occesie	2.1 N			_ Unango			
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CITY-ST-ZIP			E FL 32601				ITY-ST-ZIP	1				
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NAME	HARDY.	. CY	NZIA		_	3.2 N/	ME		Idred Rarram			
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NAME	HARDY,	, DA	LE			4. 2 N	ame.	Ray	vmond Homan			
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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 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: Robert E. Barram director Robert E. Barram 4-1-98