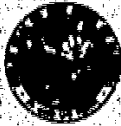


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 708257

(1)

1. Corporation Name

WESTSIDE CHURCH OF CHRIST, INC.

**APPROVED
AND
FILED**

95 APR 26 PM 1:20

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
4015 CENTERVILLE ROAD TALLAHASSEE FL 32308	4015 CENTERVILLE ROAD TALLAHASSEE FL 32308

3. Date Incorporated or Qualified 12/17/1964	3a. Date of Last Report 08/19/1994
4. FBI Number 59-1716108	Applied For ☐ Not Applicable
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes ☐ Yes ☒ No	

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

9. Name and Address of Current Registered Agent

**KERCHER, MICHAEL
4015 CENTERVILLE ROAD
TALLAHASSEE FL 32308**

10. Name and Address of New Registered Agent

81 Name **Maurice Hinds**

82 Street Address (P.O. Box Number is Not Acceptable)
2 Sika Deer Drive

83

84 City **Tallahassee** **FL** 85 Zip Code **32304**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Maurice Hinds DATE 3/22/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDV	1.1 TITLE	PD ☒ Change ☐ Addition
NAME	KERCHER, MICHAEL	1.2 NAME	Maurice Hinds
STREET ADDRESS	4015 CENTERVILLE ROAD	1.3 STREET ADDRESS	2 Sika Deer Drive
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP	Tallahassee, FL 32304
TITLE	VD	2.1 TITLE	VD ☒ Change ☐ Addition
NAME	HINTON, DAVID	2.2 NAME	Edward H. Kean
STREET ADDRESS	3185 CAPITAL CIRCLE NE	2.3 STREET ADDRESS	1506 Dove Road
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP	Tallahassee, FL 32311
TITLE	D	3.1 TITLE	SD ☒ Change ☐ Addition
NAME	HINTON, ANDY	3.2 NAME	Eugene Taylor
STREET ADDRESS	3185 CAPITAL CIRCLE NE	3.3 STREET ADDRESS	3208 W. Baldwin Dr.
CITY-ST-ZIP	TALLAHASSEE FL	3.4 CITY-ST-ZIP	Tallahassee, FL 32308
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: Edward H. Kean DATE: 3/22/95 (904) 942-7883