## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

710645

(3)

LAUDERDALE MANORS CHURCH OF CHRIST, INC.

## FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address  6080 SW 17TH ST.  POMPANO BEACH FL 33068-1616 POMPANO BEACH FL 33068-1				6					
PUMPANU BEI	NOTIFE GOLDO-TOTO				3. Date incorporated or Qualified 04/01/1966 3a. Date of Last Report 02/15/1995		/15/1995		
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number 52-1547937	Applied For Not Applicable		
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		8.75 Additional Fee Required	
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country 25	Zip 29	Coun	itry			_ Yes ∐ No	)	
24	9. Name and Address of Curre					10. Name and Address of New R	egistered Ag	ent	
	<u> </u>		· - · - ·	81 N	Name				
SMITH, HAROLD 6080 SW 17TH ST.				82 5	Street Add	Iress (P.O. Box Number is Not Acceptable)			
			ţ	83					
ļ	DERDALE FL 33068		l.	- 1	City	oration submits this statement for the purard of directors. I hereby accept the app	FL	85 Zip Code	
tamiliar wit	In, and accept the obligations of co-	ant and title if applicable:  ND DIRECTORS	NOTE: Registered	Agent si		ration submits this statement for the pu and of directors. I hereby accept the app ad when reinstaing)  ADDITIONS CHANGES TO OF	DATE ICERS AND D		
TITLE	D	<b>₩</b> DELE LE	111	TLE	:	D	<u>M</u>	mange Divocation	
NAME	TURNQUEST, CHARLES		12 N/	AME	1	Earnest Jones			
STREET ADDRESS	5978 NW 28TH ST			TREET AS	DDRESS	1400 NW 54 Terr			
CITY-ST-ZIP	SUNRISE FL 33313			TY-ST	ZIP	Lauderhill FL 3	<del>3313 ┌</del>	Change Addition	
TITLE	SDT	DELETE	2 1 Ti		ļ			• –	
NAME	SMITH, HAROLD		22 N		DODECC	<b>6.00</b> -09/17	796nî	82 <b>71</b> 56 088007	
STREET ADDRESS	6210 SW 15 ST	00		TREET A	DDRESS	*************************************	6ĭ.25	*****61.25	
CITY-ST-ZIP	POMPANO BEACH FL 330	68 DELETE	3.17		- <u>/</u> IF			Change Addition	
TITLE	PD PROJEKTED	Прессия	32 N						
NAME STREET ADDRESS	KROLAK, LEO 5900 SW 6TH ST		3.3 \$	STREET A	ADDRESS	,			
CITY-ST-ZIP	PLANTATION FL		34.	CITY-\$1	I - ZIP		<del></del>	Change Addition	
TITLE		DELETE	1	î1 <b>TLE</b>			L	Trivialde El vironnou	
NAME .				NAME					
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP		DELETE		CITY-SE Title	r-ZIP			Change Addition	
TITLE		Phereic		NAME	1		_		
NAME					ADDRESS				
STREET ADDRESS	5			CITY-S	i				
CITY-ST-ZIP	<u> </u>	DELETE		TITLE		A		Change Addition	
TITLE		_	62	NAME		\$ 7	٧		
NAME STREET ADDRESS			63	STREET	ADDRESS	**	86		
CITY-ST-ZIP			64	CITY-S	T-ZIP	fy for the exemption stated in Section 1	10.07/3VL) Ela	rida Statutes I further	
U(11112111411			4 mainhad an	4 400	e not augli	in, for the exemption stated in Section t	TO OF COMMITTEE	The Diameter Francisco	

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 119,07(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 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 certify 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:

ICHLATURE AND TYPED OR PRINTED NAME OF BRANING OFFICER OR DIRECTOR

5/7/96

954-\$ 972-1352

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CR2E037 (12/95