SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 715000

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Amoni 11911 Tree Interest Interest

98 SEP 21 PM 12: 1c1

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. Corporation Name						WILLIAM TO THE TOTAL TO THE TOTAL TO			
SUNSHINE CHRISTIAN CHURCH, INC.									
001101111	TE OFFICIAL	W 0110110111 III	0 ,			Í 1888/A ABBA BIÐRÐ BIÐU BÐUÐ BÐUÐ BÐUÐ) 1	
Principal Place of Business			Malling Address						
14225 NORTHWEST EIGHTH AVENUE			C/O SOUTH DADE CHRISTIAN CHURCH		3. Date Incorporated or Qualified				
MIAMI FL 33168-6818			10950 QUAIL ROOST DRIVE MIAMI FL 33157		08/12/1968				
			MIRMI FE 33137		4. FEI Number	-	Applied For		
2 Dringing D	loop of Buriness		2a. Mailing Address			05-0128508		Not Applicable	
2. Principal Place of Business			26 14225 NW 8 AVE		5. Certificate of Status Desired		75 Additional se Required		
Sulte, Apt. #, etc.			Suite, Apt. #, etc.	,- <u>0 110</u>		6. Election Campaign Financing		00 May Be	
22			27		Trust Fund Contribution Added to Fees				
City & State			City & State		7. Is this nonprofit corporation a homeowners association?				
23			28 Miami, I-L.			Yes XINo			
Zip	25	Country	33168	Country 30 DCAde		This corporation owes or has paid Personal Property Tax due June		ar Intangible No	
24 25 25 9. Name and Address of Current I			20 50 500			10. Name and Address of New Registered Agent			
81 Name 1 - 12 A 3 7 C 19							1050	ζ.	
ROTH, JEFFREY C ESQ. 82 Street Address						SAUCIS A ACCEPTABLE SON ACCEPTABLE		<u></u>	
ROTH & S			1273	30	ss (P.O. Box Number Is Not Acceptable	~/			
1500 SAN REMO AVE., STE. 176					Α.	MI FL 3316	<u>ን</u>		
	ABLES FL 3314			84 City	<u>"!</u>	VI PROJETO	85	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.	Some	nted name of registered agent	and title it analyzable (NOT	E: Registered Agent signature	ren lire	ed when reinelating)	DATE		
12.	orginature, types or pin		ND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
	DPC		DELETE	1.1 TITLE	D 1	2	Cha	nge Addition	
	ALVAREZ, RO	LANDO	*******	1.2 NAME	111	15 Francisco Mo 211 NW 52 ave	ir a Ies	>	
STREET ADDRESS				1.3 STREET ADDRESS	187	211 NW 52 ave			
CITY-ST-ZIP	MIAMI FL 331	57		1.4 CITY-ST-ZIP	M_{\perp}	11 MI FL 33055			
	DVC		X) DELETE	2.1 TITLE	J)V	minude lesus	Cha	ange Addition	
	CAMPBELL, W			2.2 NAME	15 A	130 W. GOLFDR			
	14451 SW 150			2.3 STREET ADDRESS	12.	130 W 130 W 1			
	MIAMI FL 331	77	F	9.4 TITLE		MMI FL 33167	T a.	6 1	
TITLE NAME	SD AECHE D	ARMAN	DELETE	3.2 NAME	(S, I)	incisan Delegus	Cha	ange Addition	
	DE JESUS, D/ 12730 W. GOI			3.2 TOURE	27	30 W GOLF DR			
	MIAMI FL 331			3.4 CITY-ST-ZIP	Mι	AMI FL 33167			
	AS		X DELETE	44700			Cha	ange Addition	
	KINNARD, GE	NF	A sereic	4.2 NAME	W	ASHINGTON MONTE	deoch		
	9040 S.W. 97			4.3 STREET ADDRESS	126	51 NE 106 57			
	MIAMI FL 331			4.4 CITY-ST-ZIP	Μĺ	1MI FL 33161			
TITLE	T		☑ DELETE	5.1 TITLE			Cha	ange Addition	
	MARTINEZ, SA			5.2 NAME			-1		
	1550 N.E. 124	TH ST		5.3 STREET ADDRESS		15 98 AR	ah	1	
	MIAMI FL			5.4 CITY-ST-ZIP		10 11/2		!	
TITLE	1		DELETE	6.1 TITLE		្តី និង្សាប់ត្រូវ ពេទ្ធ តែទៅ សការតែនៅ re- vi		ingeAddition	
NAME				6.2 NAME		30000264 -09/21/98	ស្នាស្នាស្នា ១៩ ៧០ ៨០	ម។ - ប្រែសាស	
STREET ADDRESS				8.3 STREET ADDRESS		መመስመ ነፃነት መመመመ ነፃነት		(,H_1), j	

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 43 if changed, of on an attachment with an address.

SIGNATURE: ..

9-18-518