

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 22 1996 8:00 am
Secretary of State

DOCUMENT # 716730 (7)
1. Corporation Name
SOLID ROCK CHURCH OF GOD OF KISSIMMEE, INC.



Principal Place of Business Mailing Address
1904 N. MICHIGAN AVE. KISSIMMEE FL 34744

3. Date Incorporated or Qualified **06/12/1969** 3a. Date of Last Report **07/07/1995**

21	2. Principal Place of Business	2a. Mailing Address	26	4. FEI Number	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.		59-1856374	Not Applicable
22	City & State	City & State	27	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23	Zip	Zip	28	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	Country	Country	29	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
			30		

9. Name and Address of Current Registered Agent

HICKSON, JERRY
1904 N. MICHIGAN AVE.
KISSIMMEE FL 34744

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
	FL 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: *Jerry Hickson* (NOTE: Registered Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BUTLER, MARYLU H	1.2 NAME	DIRECTOR/SECRETARY
STREET ADDRESS	4451 KISSIMMEE PARK ROAD	1.3 STREET ADDRESS	THIERRY L. BUTLER
CITY-ST-ZIP	ST CLOUD FL	1.4 CITY-ST-ZIP	4451 KISSIMMEE PARK ROAD
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D BROOMES, JAMES	2.2 NAME	
STREET ADDRESS	708 AMERICANA COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PCD HICKSON, JERRY	3.2 NAME	
STREET ADDRESS	2400 N DENN JOHN LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DE SEALY, ALFRED	4.2 NAME	DIRECTOR
STREET ADDRESS	782 AMERICANA COURT	4.3 STREET ADDRESS	ALFRED SEALY
CITY-ST-ZIP	KISSIMMEE FL	4.4 CITY-ST-ZIP	782 AMERICANA COURT
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D WESTBROOK, DALCA	5.2 NAME	
STREET ADDRESS	113 MACON WAY	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. CLOUD FL	5.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHRADER, KURT	6.2 NAME	
STREET ADDRESS	1540 BROOKSIDE	6.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL	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 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 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: *Jerry Hickson* Date: Daytime Phone: #

CR2E037 (12/95)