

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90009 017 ****70.00

DOCUMENT # 717308

1. Corporation Name

GARDEN CITY CHURCH OF CHRIST, INC.

Principal Place of Business

2707 DUNBAR ST.
2611 AVENUE 1
FT. PIERCE FL 34947
US

Mailing Address

2707 DUNBAR ST.
FORT PIERCE FL 34947



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

10/07/1969

4. FEI Number

71-7308662

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

9. Name and Address of Current Registered Agent

SIRMONS, NEAL C.
2707 DUNBAR ST.
FORT PIERCE FL 33450

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D
TILLMAN, WILLIE
STREET ADDRESS
2710 AVENUE F
CITY-ST-ZIP
FT PIERCE, FL 00000

TITLE ☐ DELETE

NAME
D
SIRMONS, FRED
STREET ADDRESS
1402 AVE G
CITY-ST-ZIP
FORT PIERCE FL

TITLE ☐ DELETE

NAME
TD
SIRMONS, NEAL C
STREET ADDRESS
2707 DUNBAR ST
CITY-ST-ZIP
FT. PIERCE FL

TITLE ☐ DELETE

NAME
D
HARRIS, SAMMY SR
STREET ADDRESS
2802 AVENUE H
CITY-ST-ZIP
FT PIERCE FL

TITLE ☐ DELETE

NAME
SD
WORTHAM, WILLIE
STREET ADDRESS
3005 IROQUOIS AVE
CITY-ST-ZIP
FT PIERCE FL

TITLE ☐ DELETE

NAME
D
SIRMONS, JONAS W.
STREET ADDRESS
2603 JUANITA AVE
CITY-ST-ZIP
FT PIERCE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: Neal C. Sirmons **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/99 (561) 461-5585

Date

Daytime Phone #

CR2E037 (11/98)

0074159