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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 719754

1. Corporation Name

COURTENAY CHRISTIAN FELLOWSHIP, INC.

Principal Place of Business
6250 N. COURTENAY PARKWAY
MERRITT ISLAND FL 32953

Mailing Address
700 S COURTNEY PKWY
MERRITT ISLAND FL 32952
US

458228 - 90097 - 41



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	11/25/1970
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	23-7068144
24 Country	29 Country	Applied For
	30 Country	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

POLICICCHIO, CAROLINA C
5780 N. COURTENAY PKWY.
MERRITT ISLAND FL 32953

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	MONTECALVO, GARY DAVID	1.2 NAME	
STREET ADDRESS	6200 NORTH COURTENAY PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	D
NAME	WELCH, NICHOLAS C	2.2 NAME	WELCH, NICHOLAS C
STREET ADDRESS	3171 SUNSET BEACH CT	2.3 STREET ADDRESS	C/O *S COURTENAY PKWY
CITY-ST-ZIP	MERRITT ISLAND FL 32952	2.4 CITY-ST-ZIP	MERRITT ISLAND FL 32952
TITLE	D	3.1 TITLE	
NAME	KREWSON, DALE G	3.2 NAME	
STREET ADDRESS	4515 TANGELO DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	ELROD, ROBERT W	4.2 NAME	
STREET ADDRESS	978 NICKLAUS DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROCKLEDGE FL 32955	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	D
NAME	CAMPBELL, DAVID	5.2 NAME	CAMPBELL, DAVID
STREET ADDRESS	3052 SKYLINE DR	5.3 STREET ADDRESS	3331 BISCAYNE DR
CITY-ST-ZIP	COCOA FL	5.4 CITY-ST-ZIP	MERRITT ISLAND FL 32953
TITLE	D	6.1 TITLE	
NAME	CLENDINEN, CLAYTON	6.2 NAME	
STREET ADDRESS	3084 SUNSET CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL 32922	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:

Nicholas C. Welch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/27/99

407/453-4555

Date

Daytime Phone #

CR2E037 (11/98)