FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

Principal Place	e of Business	Mailing Address		
1300 N. VALRICO VALRICO FL 33594 US		P.O. BOX 843 BRANDON FL 33509-0843 US		
03		•	•	3. Date incorporated or Qualified 3a. Date of Last Report 04/02/1996
Principal Place of Business 1		2a. Mailing Address 26		4. FEI Number Applied For S9-1354143 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
24	25 9. Name and Address of Curi	29 29 Agent	30	Fiorida Statutes LJ Yes LJ No 10, Name and Address of New Registered Agent
	g, Hallie Bild Addites of Odil	ight Heliatelen Whent	81 Na	
CHOTAE	SOUNDEN DE			· · · · · · · · · · · · · · · · · · ·
GUSTAFSON, REV. R.R. 1300 N. VALRICO ROAD			82 Stri	eet Address (P.O. Box Number is Not Acceptable)
	COMMUNITY CHURCH		83	
VALRICO) FL 33594		84 Cit	y FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 617.0 registered agent, or both, in the Sta m familiar with, and accept the ob	502 and 617.1508, Florida S ate of Florida. Such change ligations of, Section 617.050	Statutes, the above-nan was authorized by the I3, Florida Statutes.	med corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE ,	Signature, typed or printed name of registered	erent and title if annicable	/NOTE: Ranistered Asset sign	nature required when reinstating) DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD	DELET	E 1.1 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, BILL		1.2 NAME	}
STREET ADDRESS	1119 LADY ELAINE DR.		1.3 STREET ADDRE	ESS
CITY-ST-ZIP	VALRICO FL	Torire	1.4 CITY - ST - ZIP	
TITLE	PD D	DELET	I - · · · · ·	Change Addition
NAME	GUSTAFSON, R R 1300 N VALRICO RD.		2.2 NAME	
STREET ADDRESS	VALRICO FL		2.3 STREET ADOR	
CITY-ST-ZIP TITLE	SD	DELET		Change Addition
NAME	INZERILLI, TONY		3.2 NAME	
STREET ADDRESS	1301 W MCGEE ROAD		3.3 STREET ADDR	ESS
CITY-ST-ZIP	PLANT CITY FL		3.4. CITY-ST-ZIP	
TITLE		DELET	E ∰ 4,1 TITLE	
				☐ Change ☐ Addition
NAME			4, 2 NAME	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRI	ESS
STREET ADDRESS CITY-ST-ZIP			4. 2 NAME 4.3 STREET ADDRI 4.4 CITY-ST-ZIP	ESS
STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELET	4. 2 NAME 4.3 STREET ADDRI 4.4 CITY - ST - ZIP 5.1 TITLE	ESS
STREET ADDRESS CITY-ST-ZIP			4. 2 NAME 4.3 STREET ADDRI 4.4 CITY-ST-ZIP	ESS Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		DELET	4. 2 NAME 4.3 STREET ADDRI 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRI 5.4 CITY-ST-ZIP	ESS Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRI 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRI 5.4 CITY-ST-ZIP	ESS Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELET	4. 2 NAME 4.3 STREET ADDRI 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRI 5.4 CITY-ST-ZIP	ESS Change Addition Change Addition Change Addition

14. I do 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 12 if changed, or on an attachment with an address.

SIGNATURE:

Dna Robert R. Gustafson

2/14/97

813/689-9781

FILED

Feb 18 1997 8:00am

Secretary of State

Daytime Prione # 0045326