

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 723435 (4)
1. Corporation Name
RELIGIOUS COMMUNITY SERVICES, INC.



Principal Place of Business 1855 HIGHLAND AVE. S. CLEARWATER FL 34616-8750	Mailing Address 1855 HIGHLAND AVE. S. CLEARWATER FL 34616-8750
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3. Date Incorporated or Qualified 05/17/1972	
4. FEI Number 59-1309186	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

21. Principal Place of Business 1855 Highland Ave. S. Clearwater	2a. Mailing Address 1855 Highland Ave. S.
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State Clearwater, FL	28. City & State Clearwater, FL
24. Zip 33756-8750	29. Zip 33756-8750
Country	Country

9. Name and Address of Current Registered Agent
**HOUGHTON, ERIC
1515 BAYSHORE BLVD #28
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent
81. Name
Ron W. Dickman, Executive Director
82. Street Address (P. O. Box Number is Not Acceptable)
4104 W. Platt St.
83.
84. City
Tampa FL 85. Zip Code
33609

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 **Ron W. Dickman** **Ex. Director** **1/5/98**
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	TD <input type="checkbox"/> DELETE
NAME	WEBB, WALLACE
STREET ADDRESS	618 ROANOKE STREET
CITY-ST-ZIP	DUNEDIN FL
TITLE	PD <input type="checkbox"/> DELETE
NAME	MYERS, RAY
STREET ADDRESS	634 EDGEWATER DRIVE, #248
CITY-ST-ZIP	DUNEDIN FL
TITLE	SD <input type="checkbox"/> DELETE
NAME	GIBBS, JEAN
STREET ADDRESS	1099 MCMULLEN BOOTH ROAD, #326
CITY-ST-ZIP	CLEARWATER FL
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	TRAUTWEIN, WILLIAM
STREET ADDRESS	1949 LOS LOMAS DRIVE
CITY-ST-ZIP	CLEARWATER FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	VD Marlene Young
4.3 STREET ADDRESS	1612 Valencia Dr. W.
4.4 CITY-ST-ZIP	Largo, FL 33778
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Executive Director Ron W. Dickman
5.3 STREET ADDRESS	4104 W. Platt St.
5.4 CITY-ST-ZIP	Tampa, FL 33609
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 addendum.

SIGNATURE: **Kennard E. [Signature]** **1/7/98 (213) 584-3528**

CR2E037 (10/97)