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NONPROFIT **CORPORATION** ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

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Malling Address

NORTHSIDE CHRISTIAN CHURCH OF CHRIST OF ENGLEWOO D. INC.

FILED Apr 16 1998 8:00am Secretary of State

		AN ANAM DIAM	

2a. Mailing Address 25. Certificate of Status Desired	OF ENGLEWOOD I	A AVE.	OF ENGLEWOOD INC 685 N. INDIANA AVE. ENGLEWOOD FL 34223			 3. Date Incorporated or Qualified 06/28/1972 4. FEI Number 65-0049115 	Applied For Not Applicable		
Sulle, Apt. #, etc. Sulle, Apt. #, etc.		lace of Business	\rightarrow				\$8.75 Additional		
Trust Fund Contribution		#. etc.				& Election Compoint Einenging			
City & State 28	22								
20 Country 20 Country 20 Country 8. This corporation owes or has paid the current year intemplable Personal Property Tax due June Country No.	City & Stat	θ	City & State			7. is this nonprofit corporation a homeowner	s association?		
PEASE J LEROY 10. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name PEASE J LEROY 12. OFFICERS AND DIRECTORS 13. Name 14. City 15. Direct Address (P.O. Box Number is Not Acceptable) 16. Name and Address of New Registered Agent 17. Parsuan to the processor of Sections 677 0600 and 617 1506. Floridis Statutes, the above-manuel corporation submits this statement for the purpose of changing its registered agent. I are familiar with, and accept the obligations of Section Subhit changes was addressed the object of directors. I hereby accept the exponentiant as registered agent. I are familiar with, and accept the obligations of Section Subhit changes and address of the object of directors. I hereby accept the exponentiant as registered agent. I are familiar with, and accept the obligations of Section 57 0503, Provide Statutes. 10. SIGNATURE 12. OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. Time 15. Directors and the septiment agent and two septiments are registered agent and two remaining. 16. Change Addition 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. Directors and the septiment agent and two remainings. 10. Change Addition 10. Change Addition 10. DREET 2 INITIAL 10. Change Addition 10. Change Change Change Change Change Change Change Chang		Country		Count	ry				
PEASE J LEROY 1811 BRIDGE ST ENGLEWOOD FL 33533 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statules, the original of office or registeried agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registeried 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 office or registeried agent, and the original of	24	25	29	30		· · · · · -	- ' - "		
PEASE J LEROY 1911 BRIDGE ST ENGLEWOOD FL 33533 44 City FL 85 Zip Code 11. Pursuant to the proxisions of Sections 617.0502 and 617.1508, Florida Statules, 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, and accept the obligations of, Section 617.0502 for		9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
111 BRIDGE ST ENGLEWOOD FL 33533 63 64 City FL 86 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 and accept the obligations of, Section 617.0502 and 617.1508, Florida Statutes. SIGNATURE Signature typed or primed name of texplaced agent and time if acceptable (NOTE Registered Agent and texplaced when remeating) OATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE D NAME PEASE, J LEROY 1611 BRIDGE ST 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE DELETE 11. ITILE DELETE 11. ITILE DELETE 11. ITILE SD Change Addition Addition VISCO ER CO R.D. ENGLEWOOD, FL 00000 14. City-St-2P ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE D D DELETE 21. ITILE SD Change Addition Addition PEASE, J LEROY 15. STREET ADDRESS 15. SHREET				8.	Name				
### City ###				82		et Address (P.O. Box Number is Not Acceptable)			
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, or both, in the State of Florida, Submit of Statutes. SIGNATURE Signature Training with, and accept the obligations of Section 87 0503, Florida Statutes. SIGNATURE Signature Training with and except the obligations of Section 87 0503, Florida Statutes. SIGNATURE Signature Training with a privited ramp of legisland agent and the it applicable. PEASE, J LEROY 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 13. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-51-2P 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1611 BRIDGE ST 1611 BRIDGE ST 1611 BRIDGE ST 1611 BRIDGE ST 1612 BRIDGE ST 1612 BRIDGE ST 1612 BRIDGE ST 1612 BRIDGE ST 1613 BRIDGE ST 1614 BRIDGE ST 1614 BRIDGE ST 1615 BRIDGE ST 1615 BRIDGE ST 24 CITY-51-2P 1711	1611 BF	RIDGE ST		[_		,			
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Segret prized or printed name of Imposement agent hard filed in applicable (NOTE Regulated Agent beganner required when reinstating) DATE		m familiar with, and accept the obligat	ions of, Section 617.0503, Flor	ida Statute	es.	, , , , , , , , , , , , , , , , , , , ,			
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information				1	-	-U4/1//38U1UU1Ult	5		
	14. I hereby o	ertify that the information supplied with	h this filing does not qualify for	the exem	ption state	ed in Section 119.07(3)(i), Florida Statutes. I further ce	rtify 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 it made under oath; that I am a officer or director of the corporation or true 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 charged, or only a attachment with an address.

GNATURE:

WWW WW WILLIAM DAVID WISEFLEY 4/8/98 941-473-250