

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Jan 27 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 724348 (8)**  
 1. Corporation Name  
**RIVERSIDE CHRISTIAN FELLOWSHIP, INC.**



Principal Place of Business	Mailing Address
8032 W SAMPLE ROAD MARGATE FL 33065 US	8032 W SAMPLER ROAD MARGATE FL 33065 US

3. Date Incorporated or Qualified  
**09/15/1972**

4. FEI Number  
**59-1718004**

Applied For	Not Applicable
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21. Principal Place of Business	2a. Mailing Address
<b>957 SW 71 AVENUE</b>	<b>957 SW 71 AVENUE</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

22. City & State	27. City & State
<b>NORTH LAUDERDALE FL</b>	<b>NORTH LAUDERDALE FL</b>

7. Is this nonprofit corporation a homeowners association?  Yes  No

23. Zip	Country	28. Zip	Country
<b>33068</b>	<b>BROWARD</b>	<b>33068</b>	<b>BROWARD</b>

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**WERNER, JERRY**  
**3561 NW 99TH AVE.**  
**CORAL SPRINGS FL 33065**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	<b>FL</b>
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 \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
SD	KING, NANCY	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
10310 NW 42ND DR			
CORAL SPRGS, FL 00000			
PD	WERNER, JERRY	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3561 N W99TH AVE.			
CORAL SPRINGS, FL 00000			
VD	BROOKINS, JIMMY L	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
10935 NW 40TH ST			
CORAL SPRGS, FL 00000			
VD	BROOKINS, BRIAN	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
7007 NW 39TH STREET			
CORAL SPRINGS FL			
TD	NEWCOMBE, DAVID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
5248 NW 109 WAY			
CORAL SPRINGS FL			

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 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 in an attachment with an address.

SIGNATURE: David Newcombe 1/14/98 (954) 752-4343  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0021891

CRE037 (10/97)