

FILE NOW: FILING FEE IS \$61.25

FILED

May 14 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 724497 (3)  
1. Corporation Name  
THE CARPENTER'S HOME CHURCH, INC.



Principal Place of Business Mailing Address  
777 CARPENTER'S WAY LAKELAND FL 33804-2020 US  
P.O. BOX 995020 LAKELAND FL 33809-3921 US

3. Date incorporated or Qualified  
10/06/1972

4. FEI Number 59-1140771 Applied For 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

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

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

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent  
PEREZ, JOSEPH A.  
777 CARPENTER'S WAY  
LAKELAND FL 33809

10. Name and Address of New Registered Agent

81 Name Shane A. Simmons

82 Street Address (P.O. Box Number is Not Acceptable) 777 Carpenter's Way

83

84 City Lakeland FL 85 Zip Code 33809

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]* DATE

Signature typed or printed name of registered agent and not applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	BAKER, NORM
STREET ADDRESS	39424 ELGIN DRIVE
CITY-ST-ZIP	ZEPHYRHILLS FL 33540
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	GILLMAN, GREG
STREET ADDRESS	1025 AVON AVENUE
CITY-ST-ZIP	LAKELAND FL 33801
TITLE	D <input type="checkbox"/> DELETE
NAME	WILLIS, JODY
STREET ADDRESS	1812 WILLIAMS RD
CITY-ST-ZIP	PLANT CITY FL
TITLE	ST <input checked="" type="checkbox"/> DELETE
NAME	PEREZ, JOE
STREET ADDRESS	5428 HARBOR DR., E.
CITY-ST-ZIP	LAKELAND FL
TITLE	D <input type="checkbox"/> DELETE
NAME	MILLER, JOHN
STREET ADDRESS	3508 SYDNEY ROAD
CITY-ST-ZIP	PLANT CITY FL 33567
TITLE	CD <input type="checkbox"/> DELETE
NAME	STRADER, KARL
STREET ADDRESS	1328 EDGEWATER BEACH
CITY-ST-ZIP	LAKELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	Treasurer - T <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Shane A. Simmons
1.3 STREET ADDRESS	1328 Edgewater Beach Dr.
1.4 CITY-ST-ZIP	Lakeland, FL 338
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	Secretary/Vice P To V <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	James E. Ferrell
4.3 STREET ADDRESS	138 Buena Vista Dr.
4.4 CITY-ST-ZIP	Lakeland, FL 33805
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	President - C.P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Karl Strader
6.3 STREET ADDRESS	777 Carpenter's Way
6.4 CITY-ST-ZIP	Lakeland, FL 33809

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 person 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.

SIGNATURE *[Signature]*

CR2E037 (10/97)