FILE NOW: FILING FEE IS \$61.25

FILED Apr 23 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 727818 THE CHRISTAIN FELLOWSHIP OF BROOKSVILLE, INC. Principal Place of Business Mailing Address 7391 DUBUN ROAD 7391 DUBLIN ROAD 3. Date Incorporated or Qualified 7391 LYKES DUBLIN RD. P.O. BOX 10136 10/19/1973 **BROOKSVILLE FL 34801 BROOKSVILLE FL 34601** Applied For 59-2304450 Not Applicable 2a. Mailing Address 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 8. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes Yes ☐ No 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name ROBERTS, JAMES E Street Address (P.O. Box Number is Not Acceptable) 82 7391 DUBLIN RD 83 **BROOKSVILLE FL 34601** City M 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE NAME SMITH, MR GERALD 1.2 NAME CR2E037 6144 NEFF LK RD STREET ADORESS 1.3 STREET ADDRESS **BROOKSVILLE FL** CITY-ST-ZIP 1.4 City-St-ZiP DELETE Change Addition TITLE STD 2.1 TITLE JACKSON, ROSSO NAME 22 NAME 13119 TAFT ST. STREET ADDRESS 2.3 STREET ADDRESS **BROOKSVILLE FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME ROBERTS, JAMES E. 32 NAME 7391 DUBLIN ROAD STREET ADDRESS 33 STREET ADDRESS **BROOKSVILLE FL** CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Addition Change TITLE 41 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City - St - 7IP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 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 address.

61 TITLE

62 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

rames E. Roberts - James E. Roberts

DELETE

4-8-1998) 352-799-7853

Change

Addition