

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 13 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 # 731841 (3)**  
 1. Corporation Name  
**FIRST CHRISTIAN CHURCH OF STUART, INC.**



Principal Place of Business <b>25 N.E. DIXIE HIGHWAY STUART FL 34994</b>	Mailing Address <b>25 N.E. DIXIE HIGHWAY STUART FL 34994</b>
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3. Date Incorporated or Qualified <b>02/10/1975</b>	
4. FEI Number <b>59-1656131</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input 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 type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 25	Country 30
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<b>9. Name and Address of Current Registered Agent</b> <del>MESZAROS, JACK 3 PEPPER ST. JENSEN BEACH FL 34957</del> <b>PHILIP J. SAMECK 1108 THERESA ST. STUART, FL 34996</b>	<b>10. Name and Address of New Registered Agent</b> 81 Name <i>Philip J. Sameck</i> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1108 THERESA ST.</b> 83 84 City <b>STUART, FL</b> 85 Zip Code <b>34996</b>
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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 *Philip J. Sameck* **NEW REGISTERED AGENT** **4-2-98**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		DELETE
TITLE	<b>TR HILL, ED</b>	<input type="checkbox"/>
NAME	<b>475 AU AMERICAN BLVD.</b>	
STREET ADDRESS	<b>PALM CITY FL 34990</b>	
CITY-ST-ZIP		
TITLE	<b>TR HILL, JOHN</b>	<input type="checkbox"/>
NAME	<b>1800 NE DIXIE HWY #4-107</b>	
STREET ADDRESS	<b>JENSEN BEACH FL 34957</b>	
CITY-ST-ZIP		
TITLE	<b>TR SAMECK, PHILIP J</b>	<input type="checkbox"/>
NAME	<b>1108 S.E. THERESA ST.</b>	
STREET ADDRESS	<b>STUART FL 34996</b>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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 address.

SIGNATURE *Philip J. Sameck*

CR2E037 (10/97)