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Feb 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **733253** (9)

1. Corporation Name

ORMOND BEACH FIRST CHRISTIAN CHURCH (DISCIPLES OF CHRIST) INC.

Principal Place of Business

(DISCIPLES OF CHRIST)
50 SEVILLE STREET
ORMOND BEACH FL 32174-7647

Mailing Address

(DISCIPLES OF CHRIST)
50 SEVILLE STREET
ORMOND BEACH FL 32174-7647



3. Date Incorporated or Qualified

07/09/1975

4. FEI Number

23-7438179

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

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

9. Name and Address of Current Registered Agent

MARTIN, BETTY L
395 S. ATLANTIC AVE. #204
ORMOND BCH FL 32176

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Betty L. Martin, Treasurer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-2-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
CD
SIMMS, GENNY
307 HOPKINS AVE
HOLLY HILL FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
V
HIBBS, ROBERT
2803 GLENWOOD AVE
NEW SMYRNA BEACH FL 32168

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WALTERS, JAN
28 SUNNY BCG. DR.
ORMOND BCH. FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MARTIN, BETTY
395 S ATLANTIC, #204
ORMOND BCH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
SD
COLEMAN, MILDRED
3 FAIR OAKS CIRLCE
ORMOND BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
CD
DANCHIK, CLAUDIA
3041 ROLLINS AVENUE
DAYTONA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

Betty L. Martin, Treasurer

1-31-98 677-1133

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