FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FILED Feb 03 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1998	DIVISION OF CO	DIVISION OF CORPORATIONS		Secretary of State
DOCUI	MENT # 73492	20 (2)			
CHRIST	T CHURCH UNITED METH	HODIST, INC.			
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Principal Plac	o of Rusinoon	Mailing Address			
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4845 N.E. 25TH FT. LAUDERDAI		4845 N.E. 25TH AVE, FT. LAUDERDALE FL 33308			3. Date Incorporated or Qualified
		, i, c.100=1101101 1 2 00000			02/09/1976 4. FEI Number Applied For
					59-0931259 Not Applicable
2. Principal P	lace of Business	2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional
21	4	26			Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
City & State	9	City & State			7. Is this nonprofit corporation a homeowners association?
23		28			☐ Yes ☐ No
Zip	Country	Zip	Country	′	8. This corporation owes or has paid the current year Intangible
24	9. Name and Address of Curr	29 3	0		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
			81	Name	
RICKER,	WILLIAM		82	Street	et Address (P.O. Box Number is Not Acceptable)
500 E BROWARD BLVD					
17TH FL	·· -		83	j	
FT LAUD	DERDALE FL 33394		84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0	502 and 617 1508 Florida Statutes	the above	e-named	ed corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the Sta	te of Florida, Such change was aut	horized by	the corp	ed corporation submits this statement for the purpose of changing its registered or
SIGNATURE _	The state of the s	Same of an end an end and an end and a same			•
	Signature, typed or printed name of registered a			nt signature	ure required when reinstating) DATE A POSTCONIC OLLANDER TO CONTROL AND DIPLOTORS AN
12.	VD OFFICERS A	ND DIRECTORS X DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 VD Change X Addition
NAME	KUNKEL, JAMES	<u> </u>	1.2 NAME	ľ	Shelley Stunson
STREET ADDRESS	6561 NE 20 AVE		1.3 STREET	ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-5	T-ZIP	Oakland Park, FL 33334
TITLE	PD	DELETE	2.1 TITLE		Change Addition
NAME STREET ADDRESS	IUEN, ALICE 2142 NE 15 TERR		2.2 NAME 2.3 STREET	VUUDE66	
City-St-ZIP	WILTON MANORS FL		2.4 CITY-:		
TITLE	SD	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	Frazier, Robert W Jr.		3.2 NAME		
STREET ADDRESS	3540 BAYVIEW DR.		3.3 STREET		3
CITY-ST-ZIP TITLE	FT LAUDERDALE FL	DELETE	3.4. CTTY-:	ST- ZIP	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY - S	T-ZIP	
TITLE		DELETE	5.1 TITLE	i	Change Addition
NAME STREET ADDRESS			5.2 NAME	4000000	
STREET ADDRESS CITY-ST-ZIP		1	5.3 STREET 5.4 CITY - S	- 1	
TITLE		DELETE	6.1 TITLE	11-621	☐ Change ☐ Addition
NAME			6.2 NAME	1	
Street address		!	6.3 STREET		;
CITY-ST-ZIP	ertify that the information cumulant	with this filing does not qualify for t	6.4 CITY - S		sted in Section 119 07(3\0) Florida Statutes 1 further certify that the information
indicated	on this annual report or supplied	ntal annual report is true and accura	ate and th	at my sig	ted 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 path; 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 artachment with an address.