FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

741544 DOCUMENT #

1. Corporation Name

(1)

A CHRISTIAN'S VIEWPOINT, INC.

A CHRISTIAN'S VIEWPOINT, INC.					
rincipal Place of	Business	Mailing Address		I (MBI)I (BA)I BIBB! (IBB! dit)I Bible 4	51#2 Brimst Mrmis Mrhis Milist Milist Milist History
1108 PINE HILL		1108 PINE HILLS ROAD			
ORLANDO FL 3	2908	ORLANDO FL 32808			
US		US		 Date Incorporated or Qualified 02/07/1978 	3a. Date of Last Report 05/01/1995
		A De Address		4. FEI Number	Applied For
Principal Plac	e of Business	2a. Mailing Address		59-1803090	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
7:-	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
Zip]	25	29	30	Florida Statutes L. 10. Name and Address of New R	Yes No
ļ	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New h	egistered Agent
			81 Name		
BOOK, JO	OHN B.		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
230 W. V	ENTRIS AVE.		83		
MAITLAN			63		as Zin Codo
			84 City		FL 85 Zip Code
		50 -1017 1500 Florida Statute	se the above-named corp	oration submits this statement for the pur	rpose of changing its registered office
11. Pursuant to	o the provisions of Sections 61/	and 617-1508, Florida Statute and Such change was authoriz	ed by the corporation's bo	pard of directors. I hereby accept the app	ointment as registered agent. Fam
familiar with	h, and accept the colinations of	ection 617.0502, Florida Statutes	A du	oration submits this statement for the pul pard of directors. I hereby accept the app	4/18/92
SIGNATURE _	Elmis.	por peu	TE Registered Agent signature requ	ured when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	ICERS AND DIRECTORS IN 12 Change Addition
ITLE	STD //	DELETE	1.1 TITLE		C outside C
NAME	BOOK, SUE H		1.2 NAME		
STREET ADDRESS	230 VENTRIS		1.3 STREET ADDRESS		
CITY - ST - ZIP	MAITLAND FL	Flocusti	1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
TITLE	DP	DELETE	2.1 111LE 2.2 NAME		
NAME	BOOK, JOHN B		2 3 STREET ADDRESS		
STREET ADDRESS	230 W VENTRIS AVE		2 4 CITY - ST - ZIP		
CITY-ST-ZIP	MAITLAND FL D	DELETE	31 TITLE		Change Addition
TITLE	BOOK, JOHN B. JR		3 2 NAME		
NAME	P.O. BOX 66, N/A		3 3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	TANGERINE FL	<u> </u>	3.4. CITY - ST - ZIP		Change Addition
TITLE		DELETE	4.1 TITLE		C Change C Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Posiere	4.4 CITY - ST - ZIP		Change Addition
TITLE		DELETE	5 1 TITLE 5 2 NAME		
NAME			5 3 STREET ADDRESS	0000017	919 <u>4</u> 0
STREET ADDRESS			54 CITY - ST - ZIP	-04/24/9601	01103(
CITY-ST-ZIP		DELETE	6.1 TITLE	000017 -04/24/9601 ***61.25	Change Addition
TITLE			62 NAME) 191
NAME OTOGET ADORESS			6.3 STREET ADDRESS		1 4.6
STREET ADDRESS			6.4 CITY - ST - ZIP		10.07(3)(v) Florida Statutes I furthe
certify th	by certify that the information supports the information indicated on this at the information indicated on this at the man officer or director of the in Block 12 or Block 13 if changed	cornection or the receiver or trus	stee empowered to execut	laify for the exemption stated in Section 1 courate and that my signature shall have to this report as required by Chapter 617.	19.07(3)(K), Fiorida Statutes, Front he same legal effect as if made u Florida Statutes; and that my na

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