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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 743137

(2)

| THE D | OWLING PARK APARTMENT | S, INC. | | | | | | | | | |
|--|--|---|----------------------|---|--------------|---|--|--------------------------------------|-------------------------|-------------------------|--|
| Principal Place of Business Mailing Address | | | | | | $\neg \uparrow$ | I IDDINI NADIA DIDDE NIADI JIDDO 41611 | 1861 BIELL BIBLI BIBLI | /1011 D /01 | A DIBN (061 | |
| ADVENT CHRIS P.O. BOX 4307 DOWLING PARI | | ADVENT CHRISTIAN VILLAGE P.O. BOX 4307 DOWLING PARK FL 32060-1539 | | | | | | | | | |
| | | | | | ĺ | 3. Date Incorporated or Qualified 06/06/1978 | 3a. Date of Last Report 05/01/1996 | | | | |
| 2. Principal P Adven | iace of Business it Christian Village | 2a. Mailing Address 26 Advent Christian Village | | | : | 4. FEI Number 59-1836597 | · | | olied For Applicable | | |
| Sulte, Apt P. 0. | #. etc. Box 4307 | Suite, Apt. #, etc. P. 0. Box 4307 | | | | 5. Certificate of Status Desired | | 75 Ac ee Req | dditional quired | | |
| (O) | ng Park, FL | City & State Dowling Park, FL | | | | Election Campaign Financing Trust Fund Contribution | | .00 N | | | |
| Zip 3206 | | Zip 32064 30 | Coun | ซัร | 5 | | | Yes X No | der s. | 199.032, | |
| 9, Name and Address of Current Registered Agent | | | | | | | 10. Name and Address of New Re | gistered Agent | | | |
| | | | | | Name | | | | | | |
| MOXLEY, JOHN | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| 2320 NE | | | | | | | | | | | |
| OCALA | | 83 | | | | | | | | | |
| | | | 8 | 34 | City | | | FL 85 | Zip Co | ode | |
| office or r | to the provisions of Sections 617.0502 egistered agent, or both, in the State of mailliar with, and accept the obligat | of Florida. Such change was aut Lions of, Section 617.0503, Floric | horized da Statul | by tl tes. | he corpo | oration | 's board of directors. I hereby acce | purpose of chang pt the appointme | ing its nt as re | registered egistered | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE Registere 12. OFFICERS AND DIRECTORS 13. | | | | | signature ri | required v | ADDITIONS/CHANGES TO OFFIC | | 28012 | : IN 12 | |
| TITLE | D DELETE 1.1 | | | E | Ď |) | ADDITIONS/CHANGES TO CITY | X Ch | | Addition | |
| NAME | ERB, KEN | | | - | | Erb, Ken | | | | | |
| STREET ADDRESS | #7 MEADOW VIEW DRIVE | | | | | | . O. Box 4779, #7 Meadow View Drive | | | | |
| CITY-ST-ZIP | DOWLING PARK FL 32060 | | 1.4 CITY-ST-ZIP | | | | ling Park, FL 3206 | | | ľ | |
| TITLE | 46 | | | 2.1 TITLE P | | | | X Ch | ange | Addition | |
| NAME | HUMBLES, JAMES L | | | 2.2 NAME] | | | bles, James L. | | | | |
| STREET ADDRESS | DDRESS ADVENT CHRISTIAN VILLAGE PO BOX 4307 N/A | | | | | | 0. Box 4307 (N/A) | | | | |
| CITY-ST-ZIP | Y-ST-ZIP DOWLING PARK FL. | | | Y-\$T- | | | ling Park, FL 3206 | 4 | | | |
| TITLE | D DELETE 3.1 | | | E | | | | ☐ Ch | ange | Addition | |
| NAME | SHERRILL, BRYCE H | | | 1E | | | | | | | |
| STREET ADDRESS | | | | EET AC | DORESS | | | | | | |
| CITY-ST-ZIP | | | | 3.4. CITY-ST-ZIP | | | | V | | | |
| TITLE | | | | 4.1 TITLE C/I | | | | A∏ ch | ange | ☐ Addition | |
| NAME | *************************************** | | | 4.2 NAME N1 | | NIC. | kerson, W.C. O. Box 4781 (N/A) | y garden av | | İ | |
| STREET ADDRESS | | | | 4.3 STREET ADDRESS P. 4.4 CITY-ST-ZIP DOW | | Dorr | 0. BOX 4/01 (N/A) 14nc Dark El 3206 | | | | |
| CITY-ST-ZIP TITLE | WESTBROOK ME 44 T DELETE 51 | | | | | Dowling Park, FL 32064 T X Change | | | Addition | | |
| NAME | NICKERSON, KIRBY D 52 | | | | | _ | Nickerson, Kirby | | | Addition | |
| STREET ADDRESS | A A BAU (AAN ALII) | | | | | P. O. Box 4327 (N/A) | | | | | |
| | BOWERIO DADY PL GOOGO | | | | 1 | | ling Park, FL 3206 | . 4 | | | |
| TITLE | 2011DITO 174111 1 E 02000 | DELETE | 5.4 CITY 6.1 TITL | | LIF | S | THE TOTAL PH 3200 | Ch | ange . | Addition | |
| NAME | | | 6.2 NAM | | | Car | ter, Craig | <u></u> 0 | | | |
| STREET ADDRESS | | | 6.3 STRE | | | | 0. Box 4305 (N/A) | | | | |
| CITY-ST-ZIP | | | 6,4 CITY | | | | ling Park, FL 3206 | 54 | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | ** | | | | | |

I do 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.

May 05 1997 8:00am

Secretary of State