FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

101

1. Corporation Name	(9)					
CHURCH OF CHRIST, EASTS	DE, INC.				 	
1117 EVERETT AVE. PANAMA CITY FL 32404 PANAMA CITY FL 32404		14			3. Date Incorporated or Qualified 07/10/1978	
					4. FEI Number 59-1701205	Applied For Not Applicable
2. Principal Place of Business 21	2a. Mailing Address 26				5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt #, etc	Suite, Apl. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State	State City & State				7. Is this nonprofit corporation a homeowne	rs association?
Zip Country 24 4 25	7ip	30 Cot	intry		This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent
			81	Name		
SKIPPER, THOMAS F SR. 2902 WEST 18TH STREET			82	2 Street Address (P.O. Box Number is Not Acceptable)		
PANAMA CITY FL 32405			В3			
			84	City	FL	85 Zip Code
Pursuant to the provisions of Sections 61 office or registered agent, or txith. In the agent, I am familiar with, and accept the	State of Florida, Such change w	vas authorize	d by	the corpora	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	of changing its registered cointment as registered

agont. Familian with, and accept the obligations of, Section 617.0503, Florida Statutes.										
SIGNATURE Signature, type-t or previous corner of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	PD	☐ DELETE	1.1 TITLE	Change Addition						
NAME	SKIPPER, THOMAS F SR.		1.2 NAME							
STREET ADDRESS	2902 W. 18TH STREET		1.3 STREET ADDRESS							
CITY-ST-ZIP	PANAMA CITY FL 32405	_	1.4 CITY-ST-ZIP							
TITLE	VPD	DELETE	2.1 TITLE	Change Addition						
NAME	THOMPSON, CARLTON E		2.2 NAME							
STREET ADDRESS	11720 OLD BICYCLE ROAD		2 3 STREET ADDRESS							
CITY - ST - ZIP	PANAMA CITY FL 32404		2 4 CITY - ST - ZIP							
TITLE	\$	☐ DELETE	3 1 TITLE	Change Addition						
NAME	Mauldin, sylvia		3 2 NAME							
STREET ADDRESS	233 MELM AVE.		3 3 STREET ADDRESS							
CITY - ST - ZIP	PANAMA CITY FL 32401		3.4. CITY - ST - ZIP							
TITLE	T	☐ DELETE	4.1 TITLE	Change Addition						
NAME	BEALS, LINDA A		4. 2 NAME							
STREET ADDRESS	9310 JAMES WAY		4.3 STREET ADORESS							
CITY-ST-ZIP	PANAMA CITY FL 32404		4.4 CITY-ST-ZIP							
TITLE	D	DELETE	5.1 TITLE	☐ Change ☐ Addition						
NAME	DEESE, SHANE		5.2 NAME							
STREET ADORESS	1303 FAIRY AVE.		5.3 STREET ADDRESS							
CITY-ST-ZIP	PANAMA CITY FL 32405		5.4 CITY - ST - ZIP							
TITLE	ADV.	DELETE	6 1 TITLE	☐ Change ☐ Addition						
NAME	MAULDIN, WILLIAM		6.2 NAME							
STREET ADDRESS	233 MELM AVE.		63 STREET ADDRESS							
0.71.47.70	DANAMA CITY EL 22401		C 4 O/TV OT TIO							

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 supplimental 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.

763-8027

FILED

Feb 18 1998 8:00am

Secretary of State