FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUI 1. Corporation	MENT # 743818	3 (7)			
1	WATERS CHURCH OF DAY				
:					
Principal Place of Business Malling Address				- ((MOLILI AMBRI ALAMBA HINDU AMBRI KAMAS KASIS MIRANI ANDO	II Minte mintê denet minte innî
1016 CLEARWATER ROAD DAYTONA BEACH FL 32114		1016 CLEARWATER ROAD DAYTONA BEACH FL 32114-5705			
					ate of Last Report 05/01/1996
2. Principal Place of Business		28. Mailing Address 26		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution S. This corporation has liability for intangible	Added to Fees
24	25	29	30	Florida Statutes Yes	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	Agent
			81 Name	ATEBEV VENNEMU W	
ADAMS, J. D			82 Street Addr	TEREY KENNETH W. ress (P.O. Box Number is Not Acceptable)	
153 LEISURE CIRCLE			83 4601 CLYDE MORRIS BLVD.		
PORT ORANGE FL 32127			DAYTONA BEACH, FL. 32119		
			84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statut	es, the above-named corp		of changing its registered
office or n agent. La	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 617,0503, 56	outhorized by the corporate orida Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	pointment as registered
1		<i>F. J.</i> .	well hi (d	Shed 4-24-97	
	Signature, typed or printed name of registered ag-		E: Registered Agent Agnature requi	ed with reinstating) DATE	D DIDCOTORC IN 10
12.	TD OFFICERS AN	D DIRECTORS /	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	GEAR, DOROTHY L.		1.2 NAME		
STREET ADDRESS	931 MILLARD COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	CHANDLER, IRIS		2.2 NAME		
STREET ADDRESS	34 LESLIE LANE		2.3 STREET ADDRESS		
CHY-SY-ZIP	PORT ORANGE FL 32119	F.P. priete	2. 4 CITY-ST-ZIP		Sal Change Addition
TITLE	PD ADAMS, J. D	₩ DELETE	3.1 TITLE 3.2 NAME		Change L Addition
NAME STREET ADDRESS	153 LEISURE CIRCLE		3.2 NAME 3.3 STREET ADDRESS	ALFREY, KENNETH W.	
CITY-ST-ZIP	PORT ORANGE FL		34 CITY OF TIP	4601 CLYDE MORRIS BLV	
THLF	, , , , , , , , , , , , , , , , , , , ,	DELETE	4.1 TITLE	DAYTONA BEACH, FL.	321-change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change
NAME			5.2 NAME		ĺ
STREET ADDRESS		į,	5.3 STREET ADDRESS		ļ
CITY - ST - ZIP		☐ DELETE	5.4 CITY-ST-2IP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		- Propert	6.2 NAME		THE CONTRACTOR OF THE CARDINAGE
STREET ADDRESS			6.3 STREET ADDRESS		

14. 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

6.4 CITY-ST-ZIP

FILED

May 13 1997 8:00am

Secretary of State