FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -6 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 746260 (9)

1. Corporation Name
COMMUNITY COVENANT CHURCH OF LAKE WORTH, FLORIDA , INC.

Principal Place of Business	Mailing Address
1510 HIGH RIDGE ROAD LAKE WORTH FL 33461	1510 HIGH RIDGE ROAD LAKE WORTH FL 33461

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/15/1979
3a. Date of Last Report: 02/25/1994
4. FEI Number: 65-0456571 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 11929 E. Colonial Dr.	26 11929 E. Colonial Dr.
Suite, Apt. #, etc. 22 Suite 146	Suite, Apt. #, etc. 27 Suite 146
City & State 23 Orlando, FL	City & State 28 Orlando, FL
Zip 24 32826 Country 25 usa	Zip 29 32826 Country 30 usa

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ANDERSON, ARTHUR 1510 HIGH RIDGE ROAD LAKE WORTH FL 33461	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 4754 B Greentree Drive 83 84 City Boynton Beach FL 85 Zip Code 33436

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	1.1 TITLE	CD	☒ Change ☐ Addition
NAME	ANDERSON, ARTHUR E	1.2 NAME	Kurt Miericke	
STREET ADDRESS	1510 HIGH RIDGE RD.	1.3 STREET ADDRESS	815 Laurelcrest Drive	
CITY-ST-ZIP	LAKE WORTH FL	1.4 CITY-ST-ZIP	Orlando, FL 32828	
TITLE	VCD	2.1 TITLE		☐ Change ☐ Addition
NAME	MACFARLANE, ROBERT	2.2 NAME		
STREET ADDRESS	1510 HIGH RIDGE RD.	2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	2.4 CITY-ST-ZIP		
TITLE	TD	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	SANDER, JOHN	3.2 NAME	Emerson Lynn	
STREET ADDRESS	1510 HIGH RIDGE RD.	3.3 STREET ADDRESS	9221 W. Broward Blvd. #2510	
CITY-ST-ZIP	LAKE WORTH FL	3.4 CITY-ST-ZIP	Plantation, FL 33324	
TITLE	SD	4.1 TITLE		☐ Change ☐ Addition
NAME	LOBDELL, TAIMI	4.2 NAME		
STREET ADDRESS	1510 HIGH RIDGE RD.	4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	4.4 CITY-ST-ZIP		
TITLE	CTD	5.1 TITLE		☐ Change ☐ Addition
NAME	MACFARLENE, ROBERT	5.2 NAME		
STREET ADDRESS	1510 HIGH RIDGE RD.	5.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL	5.4 CITY-ST-ZIP		
TITLE	CD	6.1 TITLE	Secretary	☒ Change ☐ Addition
NAME	ANDERSON, LALLAH M	6.2 NAME	Bonnie Leonard	
STREET ADDRESS	1510 HIGH RIDGE RD.	6.3 STREET ADDRESS	436 Davis Road	
CITY-ST-ZIP	LAKE WORTH FL	6.4 CITY-ST-ZIP	Palm Springs, FL 33461	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Kurt Miericke 3/1/95 407/381-5789
SIGNATURE AND TYPED OR PRINTED NAME OF EXECUTING OFFICER OR DIRECTOR — Date — Daytime Phone #

0050020