FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 752246

1. Corporation Name

ROCKLEDGE CHURCH OF CHRIST, INCORPORATED

Principal Place of Business
2390 S. FISKE BLVD.
ROCKLEDGE FL 32955-3404
110

2. Principal Place of Business

Mailing Address

2a. Mailing Address

P.O. BOX 560417 ROCKLEDGE FL 32956-0417

FILED Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90033 050 ****61.25



Suite, A	ot. #, etc.	2a. Malling Address 26 Suite, Apt. #, etc.			04,	3. Date Incorporated or Qualifed 04/30/1980 4. FEI Number Applied For				
City & Si	tata	27			59	-2134420			Not Applicable	
23	r'	City & State			5 Cor	tifcate of Status [5 Additional	
	Zip Country Zip				0. 001		Desired		Required	
24				У	6. Election Campaign Financing \$5.00 May Be					
9. Name and Address of Current Registered Agent						Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent				
		rogistered Agent	81	Name	10. Nar	ne and Address	of New Register	red Agent		
BREAKFIELD, LOIS									_	
2390 S. FISKE BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)						
ROCKLEDGE FL 32955				 	<u> </u>		·		<u> </u>	
NO STEED OF TE SEASO				7						
			84	City				- 85 Z	ip Code	
11. Pursuar	nt to the provisions of Sections 617.0502 a registered agent, or both, in the State of	and 617 1508. Florida Statute	tho show	<u> </u>		TRACTOR BOTTON	er er er er er er er er	▝▐▃▗▎▗▕		
office or agent.	registered agent, or both, in the State of am familiar with and accept the obligation	Florida. Such change was at	thorized by	the corpor	ration's board o	mits this statement	nt for the purpose	of changing	its registered	
SIGNATURE	and accept the obligation	is or, Section 617.0503, Flor	ida Statutes	i.	•	230.40.3			Figure 2 & Figure 2	
SIGNATURE	Signature typed or printed name of registered agent an	and sceled 1			Quired when reinstatir		<u> </u>			
12.	OFFICERS AND I	DIRECTORS	13.	it signature req			DATE	11:0 0:000		
TITLE	PD	DELETE	1.1 TITLE	1		TIONS/CHANGES	5 TO OFFICERS			
NAME	BREAKFIELD,P. THOMAS III	•	1.2 NAME		2.,	5 5 12 25		☐ Chang	e	
STREET ADDRESS	945 BLUEGRASS LANE		1.3 STREET	Annpess	<u></u>	90000	*		ļ	
CITY-ST-ZIP	ROCKLEDGE FL		1.4 CITY- S			1.041.711	•			
TITLE	VD	☐ DELETE	2.1 TITLE	1-21						
NAME	BOGLE, JIM L.		2.2 NAME	1		•	,	Change	e 🗌 Addition	
STREET ADDRESS	The state of the s		2.3 STREET	Anness					1	
CITY-ST-ZIP	MERRITT ISLAND FL		2. 4 CITY-ST-ZIP				٠			
TITLE	T	☐ DELETE	3.1-TITLE	1-2,11	-					
NAME :	BURKEY, BELINDA		3.2 NAME					Change	Addition	
STREET ADDRESS	AA . A WITCH OLD !!!! DI !!!		3.3 STREET	ADDRESS		11.5.		100		
CITY-ST-ZIP	ROCKLEDGE FL		3.4. CITY- S1							
TITLE	SD - I	☐ DELETE	4.1 TITLE				-	☐ Change	- Addison	
NAME	GOMPF, RAYMOND H.		4. 2 NAME						Addition	
STREET ADDRESS	:	,	4.3 STREET	ADDRESS			្រុមស្ថិត ខែក្រុម ពីបានស្ថិត ស្រុក		WANTE .	
CITY-ST-ZIP	MERRITT ISLAND FL		4.4 CITY-ST-							
TITLE	D	☐ DELETE	5.1 TITLE				7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	☐ Change	Addition	
NAME	COX, MONTY P.		5.2 NAME	İ			·			
STREET ADDRESS	2402 FRIDAY CIR		5.3 STREET	NOORESS		,				
CITY-ST-ZIP	COCOA FL	<u> </u>	5.4 CITY-ST-	ZIP	4 5	No. 1 Est	. •			
TITLE	Extra Principle 1	☐ DELETE	6.1 TITLE					Change	Addition	
NAME	ATTOM STATES		6.2 NAME	i		13212	•	□ Augude		
STREET ADDRESS			6.3 STREET A	DORESS (
CITY-ST-ZIP	<u></u>		6.4 CITY-ST-	ZIP						

Thereby 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 efficiency of the comporation 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, with all other like empowered.

SIGNATURE:

407-631-1696