

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 756526 (0)
1. Corporation Name
JUPITER FARMS COMMUNITY CHURCH, INC.



Principal Place of Business: 12600 W INDIANTOWN RD JUPITER FL 33478-1678
Mailing Address: 12600 W INDIANTOWN RD JUPITER FL 33478-4678

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
22. Suite, Apt. #, etc.
23. City & State
24. Zip Country

3. Date Incorporated or Qualified: 02/26/1981
3a. Date of Last Report: 05/17/1996
4. FEI Number: 59-2470029
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
ESKUCHEN, MARTHA
1100 SIOUK STREET
JUPITER FL 33458

10. Name and Address of New Registered Agent
81 Name: DR. Clifford M. Donaldson
82 Street Address (P.O. Box Number is Not Acceptable): 18221 N. 125th Ave
83
84 City: Jupiter FL 85 Zip Code: 33478

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: *Clifford M. Donaldson* Clifford M. Donaldson 2/21/97
Signature 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: DS	NAME: BROWN, SCOTTIE	1.1 TITLE: TD	1.2 NAME: KATHY COLMAUGH
STREET ADDRESS: 17956 TAYLOR RD., UNIT C	CITY-ST-ZIP: JUPITER, FL 00000	1.3 STREET ADDRESS: 3966 Loxahatchee Pines Rd.	1.4 CITY-ST-ZIP: JUPITER, FL 33458
TITLE: PD	NAME: DONALDSON, CLIFFORD	2.1 TITLE: VD	2.2 NAME: GUY KITCHENS
STREET ADDRESS: 12600 W. INDIANTOWN RD.	CITY-ST-ZIP: JUPITER FL	2.3 STREET ADDRESS: 16642 123rd Terr. N.	2.4 CITY-ST-ZIP: Jupiter, FL 33478
TITLE: VPD	NAME: ESKUCHEN, MARTHA	3.1 TITLE: D	3.2 NAME: CRAIG JONES
STREET ADDRESS: 1100 SIOUK STREET	CITY-ST-ZIP: JUPITER FL	3.3 STREET ADDRESS: 17647 N. 183rd Trail	3.4 CITY-ST-ZIP: Jupiter, FL 33478
TITLE: D	NAME: BARON, JOHN	4.1 TITLE: SD	4.2 NAME: ROGER L. MEYERS
STREET ADDRESS: 21653 NW 161ST ST.	CITY-ST-ZIP: JUPITER, FL	4.3 STREET ADDRESS: 16718 121st Terr. N.	4.4 CITY-ST-ZIP: Jupiter, FL 33478
TITLE: VPD	NAME: BROWN, TIPPINI	5.1 TITLE:	5.2 NAME:
STREET ADDRESS: 17956 TAYLOR RD. UNIT C	CITY-ST-ZIP: JUPITER FL 33478	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:
TITLE: TD	NAME: ESKUCHEN, BOB	6.1 TITLE:	6.2 NAME:
STREET ADDRESS: 1100 SIOUX STREET	CITY-ST-ZIP: JUPITER FL 33458	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:

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 appears in Block 12 or Block 13 if changed, or on an attachment, with an address.

SIGNATURE: *Clifford M. Donaldson*

CR2E037 (9/96)