## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 758962

(5)

MIDWAY ROAD CHURCH OF CHRIST, INC.

Principal Place of Business		Mailing Address					) 1001 B1811 B1411 B1611 B1	Mit Hadel Midls (SA)
3040 WEST MIDWAY ROAD FT PIERCE FL 34981		3040 WEST MIDWAY ROAD FT PIERCE FL 34981						
						3. Date incorporated or Qualified 06/29/1981	3a. Date of Lat 02/13	
2. Principal Pla 21	ice of Business	2a. Mailing Address 26				4. FEI Number 59-2296773		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	5 Additional e Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		00 May Be
Zip 24	Country 25	Zip 29	Cour	ntry		8. This corporation has liability for		
24	9. Name and Address of Current	11	1301			10. Name and Address of New R		
<del>.</del>				81	Name			·
BUCKHA	M, ED		-	82	Street A	ddress (P.O. Box Number is Not Acceptab	le)	
2409 S E DELANO				83				
PORT S	r Lucie Fl 34952			"				
				84	City		FL 85	Zip Code
or register	o the provisions of Sections 617.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	la. Such change was authorize	s, the abo	ve-na orpor	rned cor ration's b	poration submits this statement for the pur loard of directors. I hereby accept the app	pose of changing it ointment as register	s registered office ed agent. I am
SIGNATURE							DATE	
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent s	signature rea	jured when reinstitling)  ADDITIONS CHANGES TO OFF		TORS IN 12
TIFLE	PD	DELETE	1170	TLE .			Chang	
NAME	HAWLEY, ROBERT		1,2 NA	ME			_	-
STREET ADDRESS	11180 ORANGE AVE.		1.3 \$1	REET A	DDRESS			
CITY -ST - ZIP	FT PIERCE FL			TY-ST-				
TITLE	SD	<b>KD</b> OELETE	2171			S/D	☐ Chang	e 🗶 Addition
NAME	SMITH, A. G		2 2 NA	AME		HALL, ALAN		
STREET ADDRESS	2186 S.E. STARGRASS ST.		2350	REET A	ODRESS	5985 Whipoorwill Lane		
CITY - ST - ZIP	PORT ST LUCIE FL		2 4 C	ITY-ST	-ZIP	Fort Pierce, F1. 3498		
TITLE	TD	DEFEIE	3 1 1	TLE	1	V/D	KI Chang	e Addition
NAME	BUCKHAM, ED		3 2 NA	ME		BUCKHAM, ED		
STREET ADDRESS	2409 SE DELANO RD		33\$1	TREET A		2409 SE DELANO ROAD		
CITY - ST - ZIP	PORT ST LUCIE FL	Tloriere		(TY+\$I	I - ZIP	PORT ST. LUCIE, FL. 3		ge Addition
TITLE	VD	<b>₹</b> ]DELETE	4.1 TI		ļ	T/D Claude M. Hobbs, Jr.	☐ Chang	le 🔯 vagroon
NAME	ELDRIDGE, ROBERT		4 2 N			2897 Rogers Road		
STREET ADDRESS	6380 CHASKA ST					Fort Pierce, Fl. 3498	1	
CiTY+ST+ZiP	FT. PIERCE FL	DELETE	5 1 Ti	TUE	- ZIP	rolt Fielde, FI. 3490	Chang	ge Add-tion
TITLE		مدددد	52 N		ļ			
NAME CTOCCT ADODESS					ADDRESS			
STREET ADDRESS				ITY-ST				
CITY-ST ZIP TITLE		DELETE	617		211		☐ Chang	ge Addition
NAME		<b>—</b>	62 N					
STREET ADDRESS					ADDR&S\$			
STREET RULPIESS				iTY-SI				

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)(k), 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: Col Buckham ED BUCKHAM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JANUARY 24, 1996

(407) 46L-8147

Oaytime Phone ≰

CR2E037 (12/95)