## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # 75996
1. Corporation Name

(9)

## FILED Jan 22 1998 8:00am Secretary of State

SEBRING COMMUNITY CHURCH, INC.					
Principal Place of Business Mailing Address					
1130 STATE ROAD 17 N 1130 STATE ROAD 17 N SEBRING FL 33870-3065 SEBRING FL 33870-3065					3. Date Incorporated or Qualified 09/11/1981
 					4. FEI Number Applied For Not Applied For Not Applied For
2. Principal Place of Business 28. Mailing Address 25					5. Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
					7. Is this nonprofit corporation a homeowners association?
Zip	Country Zip (		Country		Yes No
24	25	29	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
JANUTOLO, EARL E 4343-4E 1ST SCHUMACHER RD			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)
SEBRING FL 33872			83		
Ì			84	City	FL 85 Zip Code
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-office or registered agent, or both, in the State of Florida. Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
	m familiar with, and accept the obliga	ations of, Section 617.0503, Fi	orida Statutes	•	stations board of directors. Thereby accept the appointment as registered
SIGNATURE .	Signature, typed or printed name of registered age	ot and title if applicable (NO)	E: Registered Age	nt signature rec	equired when reinstating) DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JANUTOLO, EARL E.		1.2 NAME		
STREET ADORESS	4343-4 E SCHUMACHER		1.3 STREET		
CITY-ST-ZIP TITLE	SEBRING, FL 00000 D	LL DELETE	1.4 CITY-ST 2.1 TITLE	- ZIP	D 2 Change Addition
NAME	WOOLET, LYLE	TA DELLE	2.2 NAME		Hantsock. Samuel
STREET ADDRESS	4343-12 W SCHUMACHER		2,3 STREET	ADDRESS 2	207 Comet Terrace
CITY-ST-ZIP	SEBRING, FL 00000		2. 4 GITY-S	T-ZIP	Hartsock, Samuel 201 Comet Terrace Schring, FL 33872
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, GERAL S.		3.2 NAME		
STREET ADDRESS	632 TASESCHEE DRIVE		3.3 STREET ADDRESS		
CITY - ST - ZiP	SEBRING, FL 00000 D	☐ DELETE	3.4, CITY-S' 4.1 TITLE	I-ZIP	Change Addition
TITLE NAME	THOMAS, GLEN	☐ DELETE	4.1 TITLE 4. 2 NAME		Citatige [_] Addition
STREET ADDRESS	2326 BURNING CIR		4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	SEBRING, FL 00000		4.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	5.1 TITLE		Change Addition
NAME	ROBILLARD, GEORGE		5.2 NAME		-
STREET ADDRESS	RESS 3381 HARBOR BEACH DRIVE 5.3 STREET ADD		ADDRESS		
CITY-ST-ZIP	LAKE WALES FL		5,4 CITY-ST	- ZIP	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET A	ADDRESS	
			6.4 CITY-ST	1	

4. I hereby certify that the information supplied with this filling does not quality 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: Gara / LISTS MT475 FOR FALLY SAD to

1/9/98

941-471-0651