

FILE NOW: FILING FEE IS \$61.25

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Mar 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 760541 (3)
1. Corporation Name
CHRISTIAN FELLOWSHIP RADIO, INC.



Principal Place of Business 6407 13TH STREET COUNT EAST BRADENTON FL 34203	Mailing Address 6407 13TH STREET COUNT EAST BRADENTON FL 34203
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3. Date incorporated or Qualified 10/21/1981	3a. Date of Last Report 05/01/1996
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21. Principal Place of Business Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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4. FEI Number 59-2160141	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent
**HUSSEY, JERRY R
511 9TH STREET WEST,
P.O. BOX 1717
BRADENTON FL 33506**

10. Name and Address of New Registered Agent
81. Name
Lowell Brubaker
82. Street Address (P.O. Box Number is Not Acceptable)
6407 13th St. Ct. E.
83. City
Bradenton
84. State
FL
85. Zip Code
34203

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, 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: *Lowell A. Brubaker* **Lowell A. Brubaker** **3/24/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BRUBAKER, LOWELL A	
STREET ADDRESS	6407 13TH ST CT E	
CITY-ST-ZIP	BRADENTON FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BRUBAKER, HELEN L	
STREET ADDRESS	6407 13TH ST CT E	
CITY-ST-ZIP	BRADENTON FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BRUBAKER, ROBERT L	
STREET ADDRESS	1303 ARCADIA AVE.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MALUEG, DIANNE R.	
STREET ADDRESS	3817 N. KENMORE AVE.	
CITY-ST-ZIP	CHICAGO IL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	TD
3.3 STREET ADDRESS	Brubaker, Robert
3.4 CITY-ST-ZIP	Rt. 2, Box 197
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Fishersville, VA 22939
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
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: *Lowell A. Brubaker* **Lowell A. Brubaker** **3/24/97** **941.755.6689**
Signature and typed or printed name of signing officer or director Date Daytime Phone # 0078908

CR2E037 (9/96)