

ANNUAL REPORT

DOCUMENT # 761791

1. Entity Name
CHURCH ALIVE I, INCORPORATED



Principal Place of Business
3929 CRUMP RD.
LAKE HAMILTON, FL 33851 US

Mailing Address
P.O. BOX 9212
WINTER HAVEN, FL 33883-9212 US

FILED
Mar 26, 2004 08:00 AM
Secretary of State



03222004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2163567

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

YATES, SHARON R
3929 CRUMP ROAD
LAKE HAMILTON, FL 33851

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000096981
03/26/04-80020-022 61.25

10. OFFICERS AND DIRECTORS

TITLE PD
NAME YATES (GERALD E.)
STREET ADDRESS 1835 OVERLOOK DRIVE, SE
CITY-ST-ZIP WINTER HAVEN, FL

TITLE TD
NAME BROOKS (C. L.)
STREET ADDRESS P.O. BOX 9212 N/A
CITY-ST-ZIP WINTER HAVEN, FL

TITLE STD
NAME YATES, SHARON R.
STREET ADDRESS 3929 CRUMP RD
CITY-ST-ZIP LAKE HAMILTON, FL

TITLE TD
NAME SMITH, MARTHA
STREET ADDRESS 1119 BLOOM HILL AVE
CITY-ST-ZIP VALRICO, FL 33594

TITLE TR
NAME WELLS, WILBUR
STREET ADDRESS 4325 WOLF POND RD
CITY-ST-ZIP MONROE, NC 28112

TITLE TR
NAME WELLS, CINDY
STREET ADDRESS 4325 WOLF POND RD
CITY-ST-ZIP MONROE, NC 28112

**DO NOT WRITE
IN THIS SPACE**

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gerald E Yates Gerald E Yates 3-22-2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Business Phone #