FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 20 AM 11:27

DOCUMENT # 763067 (6)

1. Corporation Name
SPRING HILL UNITED CHURCH OF CHRIST, INC.

Principal Place of Business	Mailing Address
4244 MARINER BLVD. SPRING HILL FL 34609	4244 MARINER BLVD. SPRING HILL FL 34609

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/30/1982
3a. Date of Last Report: 02/15/1994
4. FEI Number: 59-1908962 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

PUSTA, NICK J
15424 PERIMETER DR
BROOKSVILLE FL 34614

10. Name and Address of New Registered Agent

81 Name: DUST, DONALD B.
82 Street Address (P.O. Box Number is Not Acceptable): 11008 CASA GRANDE CIRCLE
83
84 City: SPRING HILL FL 85 Zip Code: 34606

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Donald B. Dust, DIRECTOR — FEBRUARY 9, 1995
Signature, type or printed name 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	CTD	1.1 TITLE	CTD	☒ Change ☐ Addition
NAME	PUSTA, NICK J	1.2 NAME	DUST, DONALD B.	
STREET ADDRESS	15424 PERIMETER DR	1.3 STREET ADDRESS	11008 CASA GRANDE CIRCLE	
CITY-ST-ZIP	BROOKSVILLE FL	1.4 CITY-ST-ZIP	SPRING HILL, FL 34606	
TITLE	D	2.1 TITLE	D	☒ Change ☐ Addition
NAME	BELL, JAMES	2.2 NAME	STOKINGER, ROBERT E.	
STREET ADDRESS	8417 DANBURY LANE	2.3 STREET ADDRESS	1010 HOOK DRIVE	
CITY-ST-ZIP	HUDSON FL	2.4 CITY-ST-ZIP	SPRING HILL, FL 34608	
TITLE	TD	3.1 TITLE		☐ Change ☐ Addition
NAME	JOHNSON, ROSALIND	3.2 NAME		
STREET ADDRESS	9273 NORTHCLIFFE BLVD.	3.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL	3.4 CITY-ST-ZIP		
TITLE	TD	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	HUNTER, PAUL	4.2 NAME	HARRISON, KENNETH	
STREET ADDRESS	7076A BARCLAY AVE	4.3 STREET ADDRESS	6181 OCEAN PINES LANE	
CITY-ST-ZIP	BROOKSVILLE FL	4.4 CITY-ST-ZIP	SPRING HILL, FL 34606	
TITLE	STD	5.1 TITLE		☐ Change ☐ Addition
NAME	CHANDLER, RUTH	5.2 NAME		
STREET ADDRESS	13063 COUNTY LINE RD	5.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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)(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.

ROSALIND JOHNSON
SIGNATURE: Rosalind Johnson TREASURER — FEBRUARY 9, 1995 — (904) 686-0785
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0068038