

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90091 016 ****61.25

0071006

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 764556

1. Corporation Name

MARINER BOULEVARD CHURCH OF CHRIST, INC.

Principal Place of Business

11025 RIPLEY STREET
P.O. BOX 3503
SPRING HILL FL 34606

Mailing Address

11025 RIPLEY STREET
P.O. BOX 3503
SPRING HILL FL 34606



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/13/1982

4. FEI Number

59-2868614

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

9. Name and Address of Current Registered Agent

MCGEHEE, GUENTELLE
7413 SOUTH PINEHURST DR.
SPRING HILL FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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 **D** ☐ DELETE

NAME **JOHNSON, CHARLES**
STREET ADDRESS **1477 N FAYETTEVILLE DR.**
CITY-ST-ZIP **SPRING HILL FL**

TITLE **D** ☐ DELETE

NAME **PERRY, KIM**
STREET ADDRESS **MARY'S FISH CAMP**
CITY-ST-ZIP **SPRING HILL FL**

TITLE **D** ☐ DELETE

NAME **MEGRONIGLE, RICHARD**
STREET ADDRESS **2305 WILLOW BRANCH AVE**
CITY-ST-ZIP **LUTZ FL**

TITLE **DST** ☐ DELETE

NAME **MCGEHEE, GUENTELLE**
STREET ADDRESS **7413 SOUTH PINEHURST DR**
CITY-ST-ZIP **SPRING HILL, FL 00000**

TITLE **D** ☐ DELETE

NAME **BUTZM DAVUD**
STREET ADDRESS **8210 GOLDEN BEAR LOOP**
CITY-ST-ZIP **PORT RICHEY FL 34668**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

RICHARD MEGRONIGLE
3471 PLAZA AVE
SPRING HILL FL 34608

DAVID NITZ
8201 GOLDEN BEAR LOOP
PORT RICHEY FL 34668

14. 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 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, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED SEC TREAS 7/1-1999**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)