## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

1. Corporation	MENI#	765401		(5)								
NETTLES ISLAND CHURCH, INC.												
112112									E PORTE IN COME CONTRACTOR OF CONTRACTOR OF COME CONTRACTOR OF CONTRACTO		81811 81 <b>6</b> 11	AURO ACRIF (DA)
D: 15												
Principal Place of Business			Mailing Address							Menti Minii	#1#14 #1#11	Betre Albit iffer
9801 S. OCEAN DRIVE JENSEN BEACH FL 34957			9901 S. OCEAN DRIVE									
JENSEN DE	NOTI PL 34307		JE	NSEN BEACH FL 349	5/							
									3. Date Incorporated or Qualified 10/11/1982		of Last	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		4/05/1	Applied For
n]			26						59-2370339		-	Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional
City & State				27 Ch. B. Co.					o. Certificate of Status Desireo	]	Fee	Required
City & State				City & State					6. Election Campaign Financing Trust Fund Contribution	_	-	D May Be
Zip	Zip Country			<del></del>			untry		Trust Fulla Continuation			to Fees
24	25			29 30					This corporation has liability for intangible tax under s. 199.032,     Florida Statutes			
	9. Name and A	ddress of Current	Registe	red Agent					10. Name and Address of New Regis	tered A	gent	
						81	Name					
LITTMAN, CURTIS A.							Street	Addres	ss (P.O. Box Number Is Not Acceptable)			
1855 S. KANNER HWY., SUITE #6 STUART FL 34994												
SIUARI	1 PL 34994					83						
						84	City			FL	85 Zip	Code
11. Pursuant	to the provisions of	Sections 617.0502 a	nd 617.	1508, Florida Statute	s, the a	bove-r	named co	orporat	tion submits this statement for the purpose	of obse	ging its re	egistered office
or registe	reu agent, or pom, i	n the State of Florida obligations of, Section	. Such d	narige was authorize	d by th	e corp	oration's	board	of directors. I hereby accept the appointment	nent as re	gistered	agent. I am
SIGNATURE												
12.	Signature, typed or printed	name of registered agent and OFFICERS AND I				red Agen	t signature r	required w		DATE	DECTO	
TITLE	SD	OF HOLENS AND	DINECTO	DELETE		S. I TITLE			ADDITIONS/CHANGES TO OFFICER		Change	Addition
NAME	JISTICE, CHA	RLOTTE	_			I =		11	oases Robert	_	onange	☐ ∧odition
STREET ADDRESS	STREET ADDRESS 9801 S OCEAN DR			1.3 \$			1.3 STREET ADDRESS 98		BOI S OCEAN DR. #1810-	.2		
CITY - SI - ZIP	JENSEN BCH	. FL			1.4	CITY-S	T-ZIP		ENSEN BCH. FL.	•		
TITLE	D			DELETE	2.1	TITLE		l			Change	Addition
NAME.	JENSEN, CHI					NAME		m	ICHIELSEN EUGENE 801 S.OCELN DR. 496			•
STREET ADDRESS	9801 S. OCE/ JENSEN BCH					ADDRESS			5-3			
CITY-ST-ZIP TITLE	D DENOCH BOIL	ΤΕ		DELETE	-	4 CITY-5 I TITLE	ST-ZIP	1	ENSEN BCH. EL		Change	Addition
NAME	WAH. WILLIAN	A		- Section		NAME		H	AASE WILLIAM	_	Спапуе	☐ Modilion
STREET ADDRESS		 NN DR. #926-2					ADDRESS	9	BOI S. OCEAN DR#10	16-2		
CITY-ST-ZIP	JENSEN BCH	. FL			3.4	I. CITY-S	ST - ZIP	Ι.	ENSEN BCH. FL.	•		
TITLE	P			DELETE	4.1	TITLE			<del></del>		Change	☐ Addition
NAME	VEENSTRA, G				1	2 NAME		4	OLLEBEEK FRED 901 S. OCEAH UR *6	// L		
STREET ADDRESS		N DR. #809-2					ADDRESS	9	901 S. OCEAH UN -6	80-2		
CITY-ST-ZIP TITLE	JENSEN BCH D	<u>FL</u>		DELETE		CITY-S	T-ZIP	<u></u>	TENSEN BCH FLI		05	TT Addition
NAME	PRENTICE, RO	RERT		Correit		NAME				П	Change	☐ Addition
STREET ADDRESS	9801 S OCEA						ADDRESS					
CITY-ST-ZIP	JENSEN BCH					CITY-S						]
TITLE	D			DELETE		TITLE		<b>†</b>			Change	Addition
NAME	FISH, DORIS				6.2	NAME						-
STREET ADDRESS	9801 S OCEA				6.3	STREET	ADORESS					
CITY-ST-ZIP	JENSEN BCH		L ALC - CO			CITY-S		<u> </u>				
III. I UO Neret	by derilly that the info	armation supplied wit	n tnıs filii	na is voluntarily furnis	ned an	a does	s not qua	nity for	the exemption stated in Section 119 07(3)	(k) Floric	a Statute	se 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: Bole + Prontic POBERT R PRENTICE 2-33-96
Date Design IN OFFICER OF DIRECTOR