

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 768328

(7)

1. Corporation Name

HOLY CROSS METROPOLITAN COMMUNITY CHURCH INC.

Principal Place of Business

Mailing Address

415 N ALCANIZ ST
PENSACOLA FL 32501
US

415 N ALCANIZ ST
PENSACOLA FL 32501
US



3. Date Incorporated or Qualified

05/09/1983

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RIVERA, ZAIDA
248 REDWOOD CIRCLE
PENSACOLA FL 32506

81 Name

Jacquelyn S. Pope

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

333 Arabian Drive

83

84 City

Pensacola

FL

85

Zip Code
32506

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

Jacquelyn S. Pope

Jacquelyn S. Pope Secretary/Director

3/21/96

Signature, typed 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 ☒ DELETE

1.1 TITLE ☐ Change ☒ Addition

NAME BOLEMAN, WAYNE

1.2 NAME Hauffe, Larry

STREET ADDRESS 1401 VIA DELUNA

1.3 STREET ADDRESS 7822 Whitmire Drive

CITY-ST-ZIP PENSACOLA FL

1.4 CITY-ST-ZIP Pensacola, FL 32514

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME DAYTON, KENNETH

2.2 NAME

STREET ADDRESS 1111 MILLS AVE

2.3 STREET ADDRESS

CITY-ST-ZIP PENSACOLA FL

2.4 CITY-ST-ZIP

TITLE ☒ DELETE

3.1 TITLE ☐ Change ☒ Addition

NAME KERBE, JOANNE

3.2 NAME

STREET ADDRESS 6480 MEMPHIS AVE

3.3 STREET ADDRESS

CITY-ST-ZIP PENSACOLA FL

3.4 CITY-ST-ZIP Pensacola, FL 32506

TITLE ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME WILCOX, NORA

4.2 NAME

STREET ADDRESS 11010 BRIDGE CREEK DR

4.3 STREET ADDRESS

CITY-ST-ZIP PENSACOLA FL

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☒ Change ☐ Addition

NAME RIVERA, ZAIDA

5.2 NAME

STREET ADDRESS 248 REDWOOD CIRCLE

5.3 STREET ADDRESS

CITY-ST-ZIP PENSACOLA FL

5.4 CITY-ST-ZIP Pensacola, FL 32506

TITLE ☐ DELETE

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)(k), 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:

Jacquelyn S. Pope

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/96

DATE

904-433-8528

DAYTIME PHONE #

CR2E037 (12/95)