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 DOCUMENT #
1. Corporation Name

768328

(7)

HALV	ABAAA	AACTRODO CONTRA		ALIUDALL 141A
HULY	CHUSS	METROPOLITA	N COMMUNITY	CHURCH ING.

HOLY	CROSS METROPOLITAN CO	DMMUNITY CHURCH	INC.	 				
Principal Place of Business		Mailing Address		1 LOCATE LOCALO CATOL FORMO ALLIAN ALLIAN	// 1911 \$1811 \$1811 \$1814 \$1811 \$1811 \$1814 \$1			
415 N ALCA PENSACOLA US		415 N ALCANIZ ST PENSACOLA FL 32501 US	l	Date Incorporated or Qualified	3a. Date of Last Report			
				05/09/1983	05/01/1995			
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number 58-1588096	Applied For			
Suite Apt	#, etc.	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional			
22		27		5. Certificate of Status Desired	Fee Required			
City & State	8	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be			
Zip	Country	Zip	Country	This corporation has liability for in	Added to Fees ntangible tax under s. 199.032,			
24	25 Name and Address of Surrent	29	30	Florida Statutes] Yes ██ No			
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New Ro	egistered Agent			
DUTOA	TAIDA		1 1	Jacquelyn S. Pope				
OAD DE	, CAIDA		Address (P.O. Box Number is Not Acceptable 333 Arabian Drive	e)				
DENCA	COLA FL 30506		83	333 AI ADIAN DI IVE				
, cross	002112 02000		84 City					
			'	Pensacola	FL 85 Zip Code 32506			
11. Pursuant or register	to the provisions of Sections 617.0502 red agent, or both, in the State of Exhib.	and 617.1508, Florida Statut a. Such change was authoriz	es, the above-named or	orporation submits this statement for the purp board of directors. Thereby accept the appo	cose of changing its registered office			
	:	on 617.0503, Florida Statutes	0 - 1	ti 4	without as registered agent. Fam			
SIGNATURE	Watelin D. O. Signature, typed or printed riame of register if agent a	nd the Tappicable velyn S	Pope Secretion	ry Vicenter	3/21/96			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12			
TITLE	D M	▼ DELETE	1.1 TITLE	D	☐ Change 🙀 Addition			
NAME	OOLEMAN, WAYNE		1.2 NAME	Hauffe, Larry				
STREET ADDRESS	1101 VIA DELUNA		1.3 STREET ADDRESS	7822 Whitmire Drive				
CITY+ST-ZIP TITLE	Pensasola Fl TD	DELETE	1.4 CiTY-ST-ZIP 2.1 TITLE	Pensacola, FL 32514	☐ Change ☐ Addition			
NAME	DAYTON, KENNETH	Doccere	2 2 NAME		ET change ET Applich			
STREET ADDRESS	1111 MILLS AVE		2 3 STREET ADDRESS					
CITY-ST-ZIP	PENSACOLA FL		2 4 CITY-ST-ZIP					
THTLE	€Ð	₹ DELETE	3 1 TITLE	SD	Change 🗶 Addition			
NAME	KERBE, JOANNE		3 2 NAME	Pope, Jacquelyn				
STREET ADDRESS CITY-ST-ZIP	6460 MEMPHIC AVE		3 3 STREET ADDRESS	333 Arabian Drive				
TITLE	PENSACOLA FL D	DELETE	3.4 C(TY-ST-ZIP 4.1 TITLE	Pensacola, FL 32506	Change Addition			
NAME	WILCOX, NORA	·	4. 2 NAME		Overage Modified(
STREET ADDRESS	11010 BRIDGE CREEK DR		4.3 STREET ADDRESS					
CITY - ST - ZIP	PENSACOLA FL	···	4.4 CITY - ST - ZIP					
TITLE	CD	DELETE	5 1 TITLE	CD	Change Addition			
NAME CYPETY APPOSED	RIVERA, ZAIDA		5 2 NAME	Rivera, Zaida				
STREET ADDRESS CITY-ST-ZIP	PENSACOLA FL		5 3 STREET ADDRESS 5 4 CITY - ST - ZIP	716 North 75th Ave. Pensacola, FL 32506				
TITLE	TENONOUNTE	DELETE	61 TITLE	relisacula, rt 32506	Change Addition			
NAME		_	62 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
CITY-ST-ZIP	codifiction that the inferror	Al-Abra Elfanta	6.4 CITY - ST - ZIP					
certify that oath; that appears in	y ceruity mat the information supplied w the information indicated on this annua I am an officer or director of the corpora Block 12 or block 13 if changed, or or	It this filing is voluntarily furn I report or supplemental anni ation or the receiver or truster an attachment with an addr	ished and does not qua ual report is true and ac e empowered to execut ess.	alfy for the exemption stated in Section 119.0 courate and that my signature shall have the set this report as required by Chapter 617, Florance 119.0 courses the section of the section	7(3)(k), Florida Statutes. I further ame legal effect as if made under rida Statutes; and that my name			
SIGNATURE: partie And Type Day Tone Proper of Director of Director Day Day Director Day Day Director Day Day Director Day Day Director Day Director Day Day Director Day Day Director Day								