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 # **769201** **(5)**

1. Corporation Name

CHRIST COMMUNITY CHRISTIAN CENTER CHURCH, INC.

Principal Place of Business	Mailing Address
704 BRUNNELL PKWY. P.O. BOX 550 LAKELAND FL 33802-7550	704 BRUNNELL PKWY. P.O. BOX 550 LAKELAND FL 33802-7550

3. Date Incorporated or Qualified: 07/01/1983	3a. Date of Last Report: 04/21/1995
4. FEI Number: 59-2307770	☐ 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

LAIDLER, WALTER K JR
7511 HAVENWOOD DR
LAKELAND FL 33809

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LAIDLER, WALTER K JR		1.2 NAME		
STREET ADDRESS	7511 HAVENWOOD DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LAIDLER, CARRIE LEWIS		2.2 NAME		
STREET ADDRESS	7511 HAVENWOOD DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME	BAKER, RICHARD W., SR		3.2 NAME	HART, RICHARD	
STREET ADDRESS	3929 OLD HWY 37 VILLA 98		3.3 STREET ADDRESS	1021 WEST 13TH STREET	
CITY-ST-ZIP	LAKELAND FL		3.4 CITY-ST-ZIP	LAKELAND FL 33805	
TITLE	D	☐ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	MCNEIL, JESSE L.		4.2 NAME	LEWIS, JERRY K, SR.	
STREET ADDRESS	3405 CHART PRINE RD		4.3 STREET ADDRESS	2308 AVENUE D SOUTHWEST	
CITY-ST-ZIP	LAKELAND FL		4.4 CITY-ST-ZIP	WINTER HAVEN FL 33880	
TITLE	T	☒ DELETE	5.1 TITLE	T	☒ Change ☐ Addition
NAME	~~LEWIS, PORTIA L~~		5.2 NAME	JONES, GLENN G.	
STREET ADDRESS	~~2308 AVENUE D, S.W.~~		5.3 STREET ADDRESS	319 TUSCARORA ST	
CITY-ST-ZIP	~~WINTER HAVEN FL~~		5.4 CITY-ST-ZIP	LAKELAND FL 33805	
TITLE	D	☐ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	MOORE, EARL C., SR		6.2 NAME	WALKER, PHILLIP E.	
STREET ADDRESS	706 CONCORD LANE		6.3 STREET ADDRESS	5705 LAKE LUTHER ROAD	
CITY-ST-ZIP	LAKELAND FL		6.4 CITY-ST-ZIP	LAKELAND FL 33805	

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: Walter K Laidler 5/28/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)