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05-03-1999 90124 018 ***122.50

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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # **769201**

1. Corporation Name
CHRIST COMMUNITY CHRISTIAN CENTER CHURCH, INC.

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

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 07/01/1983
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2307770 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

LAIDLER, WALTER K JR
~~7511 HAVENWOOD DR - 634~~
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 Walter K Laidler Jr 4/22/99
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	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HART, RICHARD		1.2 NAME		
STREET ADDRESS	1021 WEST 13TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33805		1.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	WALKER, PHILLIP		2.2 NAME		
STREET ADDRESS	5705 LAKE LUTHER RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33805		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ROBINSON, JOEL		3.2 NAME		
STREET ADDRESS	916 WHISPER LAKE DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL 33880		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BAKER, RICHARD W SR		4.2 NAME		
STREET ADDRESS	3929 OLD HIGHWAY 37, VILLA #98		4.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33803		4.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	~~MCNEIL, JESSIE~~		5.2 NAME	RICHARD HART	
STREET ADDRESS	~~3405 CHART PRINE WAY~~		5.3 STREET ADDRESS	1021 WEST 13TH STREET	
CITY-ST-ZIP	~~LAKELAND FL 33809~~		5.4 CITY-ST-ZIP	LAKELAND, FL 33805	
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HART, WALTER		6.2 NAME		
STREET ADDRESS	1077 SUNSHINE WAY SW		6.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL 33880		6.4 CITY-ST-ZIP		

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: Walter K Laidler Jr PRES 4/26/99 (941) 688-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)