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May 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 837697 (2)

1. Corporation Name

REGGIE KILLOUGH'S CHRIST TEAM, INC.



Principal Place of Business

Mailing Address

1256 8TH ST
DAYTONA BEACH FL 32114
US

P O BOX 265010
DAYTONA BEACH FL 32126-5010
US

3. Date Incorporated or Qualified
01/14/1977

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
56-0990367

Applied For
Not Applicable

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

6. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KILLOUGH, REGGIE
242 TREELINE LANE
ORMOND BCH. FL 32174
13 Vanderbilt Pl.
Palm Coast, Fl. 32164

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 Reggie Killough, President

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME KILLOUGH, REGGIE
STREET ADDRESS 242 TREELINE LANE
CITY-ST-ZIP ORMOND BCH. FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS 13 Vanderbilt Pl.
1.4 CITY-ST-ZIP Palm Coast, Fl. 32164

TITLE STD DELETE
NAME RANAW, DAVID
STREET ADDRESS 320 JEFFERSON ST.
CITY-ST-ZIP PORT ORANGE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D DELETE
NAME KILLOUGH, SHIRLEY
STREET ADDRESS 242 TREELINE LANE
CITY-ST-ZIP ORMOND BCH. FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS 13 Vanderbilt Pl.
3.4 CITY-ST-ZIP Palm Coast, Fl. 32164

TITLE VPD DELETE
NAME BOOTH, DENNIS
STREET ADDRESS 63 MAIN STREET
CITY-ST-ZIP FARMINGDALE NJ

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Reggie Killough, President

4-28-97

904-265-4357

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 000011

CR2E037 (9/96)