

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 22 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 # **840364** (4)

1. Corporation Name

CHRISTIAN COMMUNICATIONS, INC.

Principal Place of Business

% L.R. WILSON
6950 MENIFEE CT.
NEW PT. RICHEY FL 34853-2725

Mailing Address

% L.R. WILSON
6950 MENIFEE CT.
NEW PT. RICHEY FL 34853-2759

3. Date Incorporated or Qualified
04/05/1978

3a. Date of Last Report
03/05/1996

4. FEI Number
58-1250506

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**

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

2. Principal Place of Business

21 **SAME**

2a. Mailing Address

26 **"**

Suite, Apt. #, etc.

22 **"**

Suite, Apt. #, etc.

27 **"**

City & State

23 **"**

City & State

28 **"**

Zip

24 **"** Country **"**

Zip

29 **"** Country **"**

Country

30 **"**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WILSON, RICHARD
6059 43RD TERR N
ST PETERSBURG FL 33709**

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

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
NAME **CST**
STREET ADDRESS **WILSON, L. R.**
CITY - ST - ZIP **6950 MENIFEE CT.
NEW PT. RICHEY FL 34853-2725**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **LUNA E.R.**
CITY - ST - ZIP **P.O. BOX 2576 NA
GULF SHORES FL**

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **ENWRIGHT, WILLIAM T.**
CITY - ST - ZIP **3702 S.W. 28TH STREET
MIAMI FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **PD**
STREET ADDRESS **WILSON, FRANK B**
CITY - ST - ZIP **6950 MENIFEE CT.
NEW PT. RICHEY FL 34853-2725**

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **HUNT, MM**
CITY - ST - ZIP **28809 BENNINGTON DRIVE
WESLEY CHAPEL FL 33544**

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **WILSON, RICHARD**
CITY - ST - ZIP **6059 43RD TERR N
ST PETERSBURG FL**

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: *[Signature]* **RECEIVED BY 25/97 AL 813-817 0692 #**

CR2E037 (9/96)