## 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 #

F93000002107 (1)

## CHRISTIAN CHILDREN'S FUND, INCORPORATED

Principal Place of Business
2821 EMERYWOOD PARKWAY

Mailing Address

2821 EMERYWOOD PARKWAY RICHMOND VA 23274

APPROVED AND FILED

1996 APR 12 PM 1:21

SECRETARY OF STATE TALLAHASSEE, FLORIDA



'	HOLMOID IN SOCIA		nic	MOND VA 23274								
									3. Date Incorporated or Qualified 05/03/1993	3a. Date of Last Report 04/25/1995		
2. Principal Place of Business				2a. Mailing Address					4. FEI Number 54-0536100		Applied For	
21				26					INOL		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional	
City & State			City & State						6 Floring Opening Street		Required	
23				28					Election Campaign Financing     Trust Fund Contribution		O May Be d to Fees	
	Zip	Country		lip	Co	ountry			8. This corporation has liability for in:			
24		25	29		30			,	·	Yes No	199.002,	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
						81 Name						
l	CT CORPORATION SYSTEM						82 Street Address (P.O. Box Number is Not Acceptable)					
1200 SOUTH PINE ISLAND ROAD						400001778454					aca l	
PLANTATION FL 33324						83 -04/12/9601050006					-006	
						84	City			·25. *****		
L							,			FL   ``   '	1	
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 heard of directors. Thereby accept the appointment as registered egent Lore												
	familiar with, and accep	pt the obligations of, Section	617.05	03 Florida Statutes	, R 1	, со.р.	J. Octor D	Doard	or or octors. Thereby accept the appoin	illient as registered	agent. rann	
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 tilling RECIAL ASSISTANT CECTATION when reinstaling)  DATE												
12	Signature, typed	or printed namic of registered agent an OFFICERS AND	O MOR <b>LETT</b>	DBS BONNE NOSION	ATV 13	SEC	FETA	RY'W	ner reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE	IDC (N. 40	
TIT		OTTIOLITO ATTO	DITIEOTO	DELETE	_	TITLE			ADDITIONS/CHANGES TO OFFIC	Change	Addition	
NA		CHARLES M DR.				NAME				C) change		
		REST AVENUE, SUITE 2	28				ADDRESS					
		ND VA 23229				OITY-SI						
TIT				DELETE		TITLE	L'LIF	VD		XI Change	☐ Addition	
NA	ME FEASTEI	r, robert K dr.		_	2.2	NAME			rbes, Betty J Mr:	s		
STREET ADDRESS 201 EIGHTTH AVE, SOUTH POB			3 801				23 STREET ADDRESS 30		301 River's Bend Circle			
CIT	Y-ST-ZIP NASHVIL	LE TN 37202				CITY-S		Ch	ester, VA 23831			
THT				DELETE		TITLE		SD		K Change	Addition	
NA.	ME <b>HARRIS,</b>	GRACE E DR.			3.2	NAME		RI	ntz, Robert Mr.	-	_	
STA	REET ADDRESS 827 W. F	Franklin St. Pos 204	1		3.3	STREET	ADDRESS	I	002 Walsham Court	t	Į	
CIT		ND VA 23284			3.4.	CITY-S	T - ZIP	Ri	chmond, VA 2323	3	Ī	
Ť(T)				DELETE	4.1	TITLE				☐ Change	Addition	
NA		ON, G. BERNARD			4 2	NAME						
STF		OCKHOE SLIP			43	STREFT	ADDRESS					
		ND VA 23204			441	CITY-SI	- ZIP					
TITI		AUAU 1115		DELETE	51	TITLE				☐ Change	Addition	
NAI		OUGH, MARGARET			521	NAME						
STF		ASTBOROUGH CT.			53	STREET	ADDRESS					
	Y-ST-ZIP RICHMO	NU VA			_	CITY-ST	-ZIP					
TIT	- L	AM 1 144 4		DELETE	61	TITLE				Change	Addition	
NA	4045.00				6.21	NAME					160	
	DOL # 10	INFEDERATE AVE.			6.3 5	STREET	ADDRESS				الاوال	
	Y-ST-ZIP RICHMO	ND VA 23227			646	CITY - ST	- ZIP	<u> </u>			นเ"	

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

Margaret The Cullough
SIGNATURE ON DEPRINTED NAME OF SIGNING OFFICER OF DIRECTOR

april 1 1996 804-156-2761