

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000002520 (3)**

1. Corporation Name

CHILDREN FOR CHRIST INTERNATIONAL, INC.



Principal Place of Business 33141 104 ST LIVE OAK FL 32060 US	Mailing Address 23141 104 ST LIVE OAK FL 32060 US
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2. Principal Place of Business 21 23141 104th ST	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State 23 LIVE OAK FL	27 City & State
24 Zip 32060	25 Country US
28 Zip	29 Country
30	

3. Date Incorporated or Qualified 05/24/1995
4. FEI Number 57-0708580
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent SNYDER, MICHAEL R RT 9 BOX 495 LIVE OAK FL 32060	
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10. Name and Address of New Registered Agent	
81 Name SNYDER, MICHAEL R.	
82 Street Address (P.O. Box Number Is Not Acceptable) 23141 104th ST	
83	
84 City LIVE OAK	85 Zip Code FL 32060

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 *Michael R. Snyder* *Michael R. Snyder* **3/20/98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	SNYDER, MICHAEL R
STREET ADDRESS	RT 9 BOX 495
CITY - ST - ZIP	LIVE OAK FL 32060
TITLE	VD <input type="checkbox"/> DELETE
NAME	SNYDER, REBECCA L
STREET ADDRESS	RT 9 BOX 495
CITY - ST - ZIP	LIVE OAK FL 32060
TITLE	STD <input type="checkbox"/> DELETE
NAME	SNYDER, LOUANN B
STREET ADDRESS	RT 9 BOX 495
CITY - ST - ZIP	LIVE OAK FL 32060
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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.

SIGNATURE: *Michael R. Snyder* *Michael R. Snyder* **3/20/98** **904 6583115**

CP2E037 (10/97)