## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G23294

(3)

CHRISTIAN COUNSELING SERVICES, INC.

**FILED** Feb 25 1997 8:00am Secretary of State



% LINDA FUI	ice of Business Hrer Land Park Boulevard Erdale FL 33311					3. Date Incorporated or Qualifie 02/08/1983		ast Report
2. Principal	Place of Husiness	2a. Mailing	Address			4. FEI Number		Applied For
21		26				59-2295888		Not Applicable
Suite, Ap	it.# etc	r1	pt. #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
22 City & St.	ale	27 City & S	State			6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	5.00 May Be
23		28				Trust Fund Contribution		dded to Fees
Ζιρ	Country	Zφ		Country		8. This corporation has liability f		oder s. 199.032,
24	25	29		30	<del></del>	Florida Statutes	Yes No	
	9. Name and Address of Curr	rent Registered Ag	jent	81	Name	10. Name and Address of New	Hegistered Agent	
	JHRER, LINDA 10 W. OAKLAND PARK BOULEV	ADD			Harrie			
	DRT LAUDERDALE FL 33311	אחט	62 Street Ad			dress (P.O. Box Number is Not Acceptable)		
	ALL EVODEUDUCE LE OCOTI			63				
				-				
				84	City		FL 65	Zip Code
SIGNATURE	Signer on the consequence of registered OFFICERS A					poration submits this statement for the tion's board of directors. I hereby actions when relastating)  ADDITIONS/CHANGES TO OF	DATE	
TITLE	DP		DELETE	1.1 TITLE			Ci	nange 🔲 Addition
NAME	FUHRER, LINDA			1.2 NAME				
STREET ADDRESS		00		1.3 STREET	ADDRESS			
C(*Y - S1 - 7)F	FORT LAUDERDALE, FL000		DELETE	14 CHY-5	γ-ZIP		[ ] C	nange
TRUE NAME	HOUMES, DANIEL W.	'	☐ DELETE	2 1 TITLE 22 NAME				range sound
STREET ADDRESS	DON ME CARL AND DE DI VID			2.3 STREET	Annerss			
CITY-ST-ZIF	FORT LAUDERDALE FL			2. 4 CiTY-			<b>'*</b>	
Tillet	DT		DELETE	3 1 TITLE			C	nange Addition
MAMÉ	FUHRER, THEODORE P.			3.2 NAME				
STREET ADDRESS	680 W. OAKLAND PK BLVD			3.3 STREET	ADDRESS			
CITY-ST ZIF	FORT LAUDERDALE FL		Driess	3.4. CITY -	ST-ZIP			
TITLE			☐ DELETE	4.1 TITLE			C	hange [_] Addition
NAME Chick t Accounts	0			4. 2 NAME	ADDRESS			
STREET ADORES: City-St-Zip	`			4.3 STREET	Į.			
TITLE			DELETE	5.1 TITLE	i - ER		c	hange Addition
NAME				5.2 NAME				
STREET ADDREST	5			5.3 STREET	ADDRESS			
CHTY+S1+ZIP				5.4 City-5	T-ZIP			
TITLE			DELETE	6.1 TITLE			c	hange Addition
NAME:				6.2 NAME				
STREET ADDRESS	\$			6.3 STREET				
CITY - ST - ZIP				6.4 CITY - S	T-ZIP			<u> </u>

I do hereby confly 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attaching twith an address.