

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N01844 (2)

1. Corporation Name

CHRISTIAN HERITAGE FOUNDATION, INC.



Principal Place of Business

Mailing Address

10025 ORANGE GROVE DRIVE
TAMPA FL 33618

10025 ORANGE GROVE DRIVE
TAMPA FL 33618

3. Date Incorporated or Qualified

03/08/1984

3a. Date of Last Report

07/03/1995

2. Principal Place of Business

2a. Mailing Address

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4. FEI Number

59-2429663

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRANT, JOHN A., JR.
10025 ORANGE GROVE DRIVE
TAMPA FL 33618

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 PD ☐ DELETE

NAME GRANT, JOHN A., JR.
STREET ADDRESS 10025 ORANGE GROVE DR.
CITY-ST-ZIP TAMPA FL

11 TITLE ☐ Change ☐ Addition

TITLE STD ☐ DELETE

NAME GRANT, BEVERLEY C.
STREET ADDRESS 10025 ORANGE GROVE DR.
CITY-ST-ZIP TAMPA FL

12 NAME ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME GRANT, JOHN A., III
STREET ADDRESS 10025 ORANGE GROVE DR.
CITY-ST-ZIP TAMPA FL 33618

13 STREET ADDRESS ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME ODOM, JEANETTE
STREET ADDRESS 10025 ORANGE GROVE DR.
CITY-ST-ZIP TAMPA FL 33618

14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

15 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

16 CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)