FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(8)

THE CHRISTIAN AND MISSIONARY ALLIANCE CHURCH OF

FILED

Mar 16 1998 8:00am

Secretary of State

WINTER HAVEN, FLORIDA, INC.							
Principal Place of Business Mailing Address					1 (00)(101 10) 00101 01(0) (1001 11000 11)(01011 01	ALT OFBIT DIVING BL	ibil dibit 18fi
2401 34TH ST NW WINTER HAVEN FL 33381-1076 US		2401 34TH ST NW WINTER HAVEN FL 33881-1078 US		3. Date Incorporated or Qualified 09/12/1984 4. FEI Number	AF	oplied For	
Principal Place of Business 2a. Mailing Address					59-2262831 5. Certificate of Status Desired □	\$8.75	
21 Po Box 3223 Suite, Apt. #, etc.					# Fleetien Computer Financies	Fee Re	
22 200 Cyproso Gardons BLUFF					6. Election Campalgn Financing Trust Fund Contribution	\$5.00 A Added to	
23 W/NT				<u></u>	7. Is this nonprofit corporation a homeowned Yes	rs associatior XNo	1?
Zip 338	3880 25 Country Zip Zip 29 33885-3 223 30		Country	. —	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Inte	angible No
	9, Name and Address of Currer	t Registered Agent			10. Name and Address of New Registered		
			81	Name	SAME		
BOWERS, DOYLE E.				82 Street Address (P.O. Box Nureber is Not Acceptable)			
308 FERN ROAD WINTER HAVEN FL 33880-8309			83		Zip Codo Chan Con	Me -	
***************************************			84	City	33880-1307 FL	85 Zip C	Code
44 5	1 A	0.000 047 4500 Firster Otal Tax	Alba alaasi		33880-1307 FL		
office or s agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered age	ations of, Section 617.0503, Florid	da Statutes	s. ·	lion's board of directors. I hereby accept the apprendiction of directors and the second of directors. I hereby accept the apprendiction of the second of directors and the second of directors.	ointment as	registered
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PD	☐ DELETE	1.1 TITLE			Change .	Addition
NAME	BOWERS, DOYLE		1.2 NAME		,		
STREET ADDRESS	308 FERN ROAD		1.3 STREET	· 1	33880	_120 9)
CITY-ST-ZIP TITLE	WINTER HAVEN FL SD	DELÉTÉ	1.4 CITY - S 2.1 TITLE	T-ZIP	30000	D Channe	Addition
NAME	PICKETT, DEBORAH	C peccie	2.2 NAME			A Change	Addition
STREET ADDRESS	1828 3RD ST SE	1	2.3 STREET	ADDRESS			ľ
CITY-ST-ZIP	WINTER HAVEN FL		2. 4 CITY-S		3 388 0	- 4426	4
TITLE	TD	DELETE	3.1 TITLE			Change	Addition
NAME	PICKETT, W.J.		3.2 NAME			_	ĺ
STREET ADDRESS	1828-3RD STREET, S.E.		3.3 STREET	ADDRESS	7.000	111161	,
CITY-ST-ZIP	WINTER HAVEN FL		3.4. CITY - S	T-ZIP	33880-	-440	<i>f</i>
TITLE		DELETE	4.1 TITLE		<u>-</u>	Change	☐ Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP	<u> </u>	100	4.4 CITY - ST	r-zip			
TITLE		DELETE	5.1 TITLE			☐ Change	L Addition □
NAME			5.2 NAME	ļ			
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		DELETE	5.4 C(TY - S)	r-zip		Change	Addition
TITLE		C DELETE	6.1 TITLE	1		T CHANGE	☐ Addition
NAME CTOSET ADDRESS			6.2 NAME	ADDDEGG			
STREET ADDRESS			6.3 STREET				1
14. I hereby o	ertify that the information supplied wi	th this filing does not qualify for t	6.4 CITY-S		Section 119.07(3)(i), Florida Statutes, I further ce	rtify that the	Information

Indicated on this annual report or supplied with this liting boes not quality for the exemption stated in Section 119.0/(3)(), Florida Statutes. Interfer 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 trostee ampowered 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.

GNATURE:

3/8/98

44-713-2155

SIGNATURE: