## 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 N05909 DOCUMENT #
1. Corporation Name

(9)

CHRIST THE KING COMMUNITY CHURCH, INC.

2.11.10										
Principal Place	of Business	Mailing Address				P 18621161 Alt Balet Birth 1841 Adule (	417 BIG (1 <b>416</b> )		wit digit widil 1897	
5417 S.W. 44T	H TERRACE		5417 S.W. 44TH TERRACE							
P.O. BOX 6613 FT. LAUDERDA		P.O. BOX 6613 Ft. Lauderdale FL 333								
FI. LAUDERUA	ILE FL 33314	FI. DAUDERDALE TE 00014			<ol> <li>Date Incorporated or Qualified 10/29/1984</li> </ol>	corporated or Qualified 3a. Date of Last Report 03/02/1995				
2, Principal Pla	ce of Business	2a. Mailing Address				4. FEI Number	4. FEI Number Applied For			
21		26				59-2462143	59-2462143 Not Applicable			
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required				
22		27								
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip Country		Zip Country				This corporation has liability for intangible tax under s. 199.032,				
24	25 29			Ftorida Statutes Ye				Yes 🗹 No		
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Ro	egistered	Agent		
				81	Name					
	V. MORGAN		82 Street Add			Address (P.O. Box Number is Not Acceptabl	e)			
	V. 44TH TERRACE		83							
FT. LAUD	DERDALE FL 33314			63			· ·			
				84	City		FL	85	Zip Code	
44 5	a the provisions of Sections 617.050	2 and 617 1508 Florida Statute	s the abo	WB-1	named co	rporation submits this statement for the pur	pase of ch	anging i	its registered office	
or register	ed agent, or both, in the State of Flor	rida. Such change was authorize	ea by the i	corp	oration's	board of directors. I hereby accept the appo	bintment as	registe	ered agent. I am	
	th, and accept the obligations of, Sec	ction 617,0503, Florida Statules								
SIGNATURE _	Signature, typed or printed name of registered age	nt and titre it applicable (NO	TE Rogistered	і Аун	nt signature re	quired when reinstating)	DATE			
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS CHANGES TO OFF				
TITLE	TD	DELETE	11 TITLI					Chan	ige 🔲 Addition	
NAME	HILL, MYRA		1.2 N		ļ					
STREET ADDRESS	6028 GARFIELD ST.			1.3 STREET ADDRESS 1.4 City - St - ZIP						
CITY-ST-2IP	HOLLYWOOD FL	□ DELETE	2.1 TIFL		ST · ZIP			Chan	nge	
TITLE	PD Speer, W. Morgan	_		2.2 NAME						
NAME	5417 SW 44 TER				1 ADDRESS					
STREET ADDRESS	FT. LAUDERDALE FL				ST-ZIP					
CITY-ST-ZIP TITLE	SD	DELETE	31 TiTL		<u> </u>	D		Char	nge 🔲 Addition	
NAME	SPEER, CINDY R.	_	321	IAME		speer, Cindy R. 5417 Sw 44 Terr				
STREET ADDRESS	5417 SW 44 TER		335	TREE	T ADDRESS	5417 3W 44 Terr	I			
CITY - ST - ZIP	FT. LAUDERDALE FL		3 4	CITY -	ST-ZIP	Ft Lauderdale FL 3	5514			
TITLE	D	DELETE	4.1 1					Char	nge 🔲 Addition	
NAME	CASSIN, HELEN			NAME						
STREET ADDRESS	69 DOGWOOD WAY		1		T ADDRESS					
CITY-ST-ZIP	COOPER CITY FL	DELETE	51		ST-ZIP	SD		Char	nge Addition	
TITLE	wil say anda	Finerese		NAME		WILSON, Carole				
NAME OTOTET ADDRESS	(A10 CA DOLLAR	+			T ADDRESS	WILSON, Carole 6028 GARFIELD ST				
STREET ADDRESS		•			ST-ZIP	HOLLYWOOD, FL 330	24		/	
CITY-ST-ZIP TITLE		DELETE		TITLE		7		Cha	nge 🕒 Addition	
NAME			62	NAME		HICKEY, JERRY				
STREET ADDRESS			6.3	STREE	T ADDRESS	HICKEY, JERRY				
CITY - ST - ZIP			6 4	CITY -	ST-ZIP	MIAMI, FL 33104				
4.4 Lula basal	by postify that the information supplies	d with this filing is voluntarily fur-	nished and	t do	es not out	alify for the exemption stated in Section 119	.07(3)(k), F	iorida S	itatutes. I further	

I do hereby certify that the information supplied with this tiling is voluntarily furnished and does not quality for the exemption stated in Section 13 except the 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. Morgan Speer W. Horgan Speer Pres/Dir 4-27-96 (954) 581-4547 SIGNATURE:

CR2E037 (12/95)