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Feb 06 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N06401 (6)
1. Corporation Name
FIRST CHRISTIAN CHURCH, BARTOW, FLORIDA, (DISCIPLES OF CHRIST), INC.



Principal Place of Business: 400 SOUTH OAK AVE, BARTOW FL 33830-839 US
Mailing Address: 400 SOUTH OAK AVE, BARTOW FL 33830-4839 US

3. Date Incorporated or Qualified: 11/30/1984
3a. Date of Last Report: 02/20/1996

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
22. Suite, Apt. #, etc.
23. City & State
24. Zip, Country

4. FEI Number: 59-6141941
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

9. Name and Address of Current Registered Agent
HATCHER, ROBERT
400 S OAK AVE
BARTOW FL 33830

10. Name and Address of New Registered Agent (81-85)
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D OSBORNE, JACK	1.1 TITLE	VCD OSBORNE, JACK
NAME	OSBORNE, JACK	1.2 NAME	OSBORNE, JACK
STREET ADDRESS	2243 US HWY 17 SO	1.3 STREET ADDRESS	2243 US HWY 17 SO
CITY-ST-ZIP	BARTOW FL	1.4 CITY-ST-ZIP	BARTOW FL
TITLE	PDC HATCHER, ROBERT	2.1 TITLE	TDC HATCHER, ROBERT
NAME	HATCHER, ROBERT	2.2 NAME	HATCHER, ROBERT
STREET ADDRESS	8259 BUTTERNUT DRIVE	2.3 STREET ADDRESS	1842 SANDY KNOLL CR
CITY-ST-ZIP	LAKELAND FL	2.4 CITY-ST-ZIP	LAKELAND FL
TITLE	VCD BRYAN, KENNETH R. SR.	3.1 TITLE	P BRYAN, KENNETH R. SR.
NAME	BRYAN, KENNETH R. SR.	3.2 NAME	BRYAN, KENNETH R. SR.
STREET ADDRESS	780 WEST DAVIDSON	3.3 STREET ADDRESS	780 WEST DAVIDSON
CITY-ST-ZIP	BARTOW FL	3.4 CITY-ST-ZIP	BARTOW FL
TITLE	TD WOIKE, ELSIE	4.1 TITLE	D WOIKE, ELSIE
NAME	WOIKE, ELSIE	4.2 NAME	WOIKE, ELSIE
STREET ADDRESS	650 W. CLOWER	4.3 STREET ADDRESS	650 W. CLOWER
CITY-ST-ZIP	BARTOW FL	4.4 CITY-ST-ZIP	BARTOW FL
TITLE	SD DAY, CAROLINE	5.1 TITLE	
NAME	DAY, CAROLINE	5.2 NAME	
STREET ADDRESS	7211 ESTATE ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	5.4 CITY-ST-ZIP	
TITLE	VD GARMON, BOYCE	6.1 TITLE	PD GARMON, BOYCE
NAME	GARMON, BOYCE	6.2 NAME	GARMON, BOYCE
STREET ADDRESS	2055 FLORAL AVE S	6.3 STREET ADDRESS	2055 FLORAL AVE S
CITY-ST-ZIP	BARTOW FL	6.4 CITY-ST-ZIP	BARTOW FL

14. I do 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: Robert L. Hatcher ROBERT L. HATCHER 2/1/97 941-647-5632
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0063500

CR2E037 (9/96)