(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

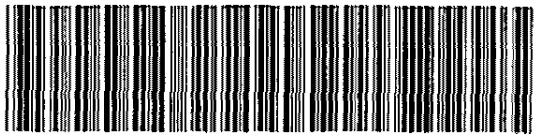
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800037795458

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APR-5 91

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1 Name and Mailing Address of Corporation DOCUMENT #N09982 (2)

ZIP + 4 PRESORT
FIRST CHRISTIAN CHURCH, PLANT CITY, FLORIDA
2108 THONOTOSASSA RD.
PLANT CITY, FL 33566-2913

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address
22 P.O. Box No.
23 City and State
24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 06/26/1985

4 FEI Number: NOT APPLIC
FEI Number Applied For
FEI Number Not Applicable

5 $8.75 Additional Fee required for a Certificate of Status
CERTIFICATE OF STATUS DESIRED

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	~~T/D~~	~~TROWBRIDGEM, ARTHUR R.~~	~~905 N FRANKLIN ST.~~	~~PLANT CITY, FL~~
1x				
2	P/D	WALKER, PAUL D. (D)	1416 GLENDALE	LAKELAND, FL 33803
2x				
3	C/D	HILL, WILLIAM (D)	4916 MILEY RD W	PLANT CITY, FL 33565
3x				
4	C/D	COPELAND, RICHARD (D)	1500 W. HIGHLAND ST., LOT 165	LAKELAND, FL 33801
4x				
5				
5x				
6				
6x				

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

TROWBRIDGE, ARTHUR R.
905 N FRANKLIN ST.
PLANT CITY, FL 33566

8 Name and Address of New Registered Agent

81 Name: Richard Copeland
82 Street Address 1 (Do NOT Use P.O. Box Number): 1500 W. Highland St., Lot 165
83 Street Address 2 (Do NOT Use P.O. Box Number):
84 City: Lakeland, FL
85 Zip Code: FL. 33801

9 Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Richard D. Copeland (Registered Agent Acceptance/Appointment) DATE: 2-10-91

10 I 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; I further certify 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 6 or on an attachment with an address.

SIGNATURE: Richard D. Copeland DATE: 2/10/91

Typed Name of Signing Officer or Director: Richard D. Copeland
Title: Chairman of the Board
Telephone Number Daytime: (813) 688-6895

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State **$8.75 Additional Fee required for a Certificate of Status**