FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

N12483

(6)

CHURCH OF CHRIST UPON THE ROCK OF THE APOSTOLIC

FAITH, INC.										
Principal Plac	e of Business	Mailing Address	failing Address			- I INBANINI ONI SINILA NINII NYOOT INVON MI	IF WINDL BINDS WINDS	ALBEI BIO	FFT WI WIR FWET	
1800 N.W. 91H AVE. FT. LAUDERDALE FL 33311 US		1800 N.W. 9TH AVE. FT. LAUDERDALE FL 33311-4826 US								
						3. Date Incorporated or Qualified 12/11/1985	3a. Date of 04/2	Last Re 2 5/19 8	port 6	
	Place of Business	2a. Mailing Address				4. FEI Number			plied For	
21		26				65-0002997			t Applicable	
Suite, Apt.	#, elc.	Suite, Apt. #, etc.	27			5. Certificate of Status Desired		5./ 5 A Fee Re	dditional guired	
City & Stat	е	City & State				6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution		dded t		
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for in			199.032,	
24	25 29 30 9. Name and Address of Current Registered Agent			Florida Statutes Yes No 10, Name and Address of New Registered Agent						
					81 Name					
JOHNSO	N FRNEST									
JOHNSON, ERNEST 3420 N.W. 35TH STREET				82	Street Addre	ess (P.O. Box Number is Not Acceptable	a)			
FT LAUDERDALE FL 33309				83						
				84	City		85	Zip (Code	
				Ц	•			· ·	1	
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 register 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 registere agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									s registered registered	
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable. (NO	TE: Registere	d Agen	it signature require	ed when reinstating)	DATE			
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIRE	CTOR	\$ IN 12	
THILE	DP	☐ DELETE	1.1 Ti	TLE			C	hange	Addition	
NAME	JOHNSON, ERNEST		1.2 N/							
STREET ADDRESS	3420 N.W. 35TH STREET FT LAUDERDALE FL				ADDRESS				ļ	
CITY-ST-ZIP TITLE	D	DELETE	2.1 TI	TY-ST TLE	· ZIF			hange	Addition	
NAME	MURCHINSON, ERNEST			ME				•		
STREET ADDRESS	5801 SW 16 STREET		2.3 \$1	REET A	ADDRESS				-	
CITY-ST-ZIP	FT LAUDERDALE FL		2.40	πy-st	r-zip					
TITLE	D DODINGON LLIGHTS	DELETE	3.1 TF		{		ЦC	hange	Addition	
NAME	ROBINSON, LUCIUS 5251 N E 8 AVE		3.2 N						ļ	
STREET ADDRESS CITY-ST-ZIP	POMPANO BEACH FL			IREET # ITY-ST	ADDRESS				ļ	
TITLE	S S	DELETE	4.1 7		-41			Change	Addition	
NAME	HUNTER, JOSEPH		4.2 N	AME	1					
STREET ADDRESS			4.3 \$	REET A	address					
CITY-ST-ZIP	FT. LAUDERDALE FL			TY-ST	-ZIP					
TITLE		☐ DELETE	5.1 1/				٥	Change	Addition	
NAME PROCEST ADDRESSES			5.2 N		- approc				i	
STREET ADORESS					ADDRESS				1	
CITY-ST-ZIP TITLE		DELETE	6.1 TI	TY-ST TLE	-tir		Пс	hange	Addition	
NAME			6.2 N		Ì		<u> </u>			
STREET ADDRESS					ADDRESS .					
CITY-ST-ZIP				TY-ST	1					

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

GNATURE AND TYPED OR PRINTED NAME OF BRONING OFFICER OR DIRECTOR

1-24-97 954-467-0757 Date Daysing Phone 9 0004506

FILED

May 19 1997 8:00am

Secretary of State