FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -5 PM 3:14

DOCUMENT # N13018 (9)

1. Corporation Name
COMMUNITY BIBLE CHURCH OF BROOKSVILLE, INC.

Principal Place of Business	Mailing Address
22299 CORTEZ BOULEVARD P. O. BOX 10017 BROOKSVILLE FL 34601	22299 CORTEZ BOULEVARD P. O. BOX 10017 BROOKSVILLE FL 34601

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/09/1985
3a. Date of Last Report: 03/10/1994
4. FEI Number: 59-3093711 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 706 Ponce de Leon Blvd.	26 706 Ponce de Leon Blvd.
Suite, Apt. #, etc. 22 P.O. Box 10017	Suite, Apt. #, etc. 27 P.O. Box 10017
City & State 23 Brooksville, FL	City & State 28 Brooksville, FL
Zip / Country 24 34601 / 25 USA	Zip / Country 29 34601 / 30 USA

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BROWN, CARL
22299 CORTEZ BOULEVARD
BROOKSVILLE FL 34601

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 706 Ponce de Leon Boulevard
83
84 City: FL 85 Zip Code

11. 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: Carl Brown — 3/29/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	1.1 TITLE	D	☐ Change ☒ Addition
NAME	BROWN, CARL	1.2 NAME	Robert Gruber	
STREET ADDRESS	29249 WILPAYNE RD.	1.3 STREET ADDRESS	1523 June Avenue	
CITY-ST-ZIP	BROOKSVILLE FL	1.4 CITY-ST-ZIP	Brooksville, FL 34601	
TITLE	D	2.1 TITLE	D	☐ Change ☒ Addition
NAME	BALOGH, WILLIAM	2.2 NAME	Dr. Thomas Marshall	
STREET ADDRESS	2319 ENDSLEY ROAD	2.3 STREET ADDRESS	25515 Hayman Road	
CITY-ST-ZIP	BROOKSVILLE FL	2.4 CITY-ST-ZIP	Brooksville, FL 34602	
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	BRAZINSKI, BRUCE	3.2 NAME		
STREET ADDRESS	27068 WAKEFIELD DRIVE	3.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	PRITZ, KENNETH	4.2 NAME		
STREET ADDRESS	710 FERNWOOD DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, JAMES H.	5.2 NAME		
STREET ADDRESS	26111 CHURCH ROAD	5.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	SINGER, CHARLES	6.2 NAME		
STREET ADDRESS	23244 SINGER LANE	6.3 STREET ADDRESS		
CITY-ST-ZIP	BROOKSVILLE FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Carl Brown — 3/29/95 — (904) 799-5462
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Carl Brown

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