

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 17 PM 2: 56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N14698 (7)
1. Corporation Name
CHRISTIAN FELLOWSHIP OF PINELLAS COUNTY, INC.

Principal Place of Business Mailing Address
**1800 N. HERCULES AVE.
CLEARWATER FL 34625-2127
US** **1800 N. HERCULES AVE.
CLEARWATER FL 34625-2127
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/02/1986	3a. Date of Last Report 02/14/1994
4. FEI Number 59-2648962	Applied For ☐ Not Applicable ☐
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	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**LILES, DONNY
1125 SPANISH OAK DR.W.
PALM HARBOR FL 34683**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1408, 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

Donny Liles
Signature typed or printed name of registered agent (not applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

4-11-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	☐ Change ☐ Addition
NAME	LILES, DONNY	1.2 NAME	
STREET ADDRESS	1125 SPANISH OAKS DR.W.	1.3 STREET ADDRESS	
CITY - ST - ZIP	PALM HARBOR FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	REEVES, RAY L.	2.2 NAME	
STREET ADDRESS	1240 16TH COURT S.W.	2.3 STREET ADDRESS	
CITY - ST - ZIP	LARGO FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	RAMSEYER, GREGORY	3.2 NAME	
STREET ADDRESS	2652 ULLMAN COURT	3.3 STREET ADDRESS	
CITY - ST - ZIP	PALM HARBOR FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Donny Liles*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donny Liles - President

4-11-95

DATE

813-441-2585

Typed Name