## **FILE NOW: FILING FEE IS \$61.25**



	COR ANNU	NPROFIT PORATION IAL REPORT		FLORIDA DEPARTN Sandra B. I Secretary DIVISION OF CO	<b>Mortham</b> of State		Feb 18 19 Secretar			
Ĺ	OCUN	MENT #	N14773	(8)	1					
1.		OR CHRISTIAN	CHURCH INC	( )						
	MIONE	AI OHIIOHAH	OHOHOH INC.					NA BIBA BIBA BARI		
Principal Place of Business Mailing Address							- I HABINIUM EUF HABIT UNDER LUMB HABID I	fil exelt block block		
11851 EAST TERRY STREET BONITA SPRINGS FL 33923				11651 EAST TERRY STREET BONITA SPRINGS FL 33923			3. Date Incorporated or Qualified			
				DOWN DITMEDO 12 DODGO			<b>05/06/1986</b> 4. FEI Number		Applied	d For
	D						59-2571400		<del>                                      </del>	plicable
2. 21	Principal Pia	ace of Business		2a. Mailing Address			5. Certificate of Status Desired		.75 Additi ee Require	
22	Suite, Apt. 4	Y, etc		Suite, Apt. #, etc.			Election Campaign Financing     Trust Fund Contribution	\$5.	.00 May I	Be
_	City & State			City & State			7. Is this nonprofit corporation a hor	neowners asso		10
23	Zip	Cou		<b>28</b> ] Zip	Country		This corporation owes or has paid	Yes No	ar Intangil	hle
24		25		29 30	0		Personal Property Tax due June :	30. 🔲 Yes	□ No	
Name and Address of Current Registered Agent     81 Name A							10. Name and Address of New Reg	istered Agent		
OBJADA BONAN						Cu	AT GUNDER			
106 CURACAO LANE					0000	t Addres イミタ	on (Co. pov manipo, in mor videobimo:	θ) R' 1 V €		
BONITA CPRINGS FL 33923					83					
	•				84 City		_	85	Zip Code	, 0
11	Pursuant to	the provisions of S	ections 617.0502 ar	a 617)1508, Florida Statutes	, the above-name	<u>≠    &gt;∵                                </u>	ERO ration submits this statement for the pu	rpose of chang	ing its reg	istered
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 office or registered againt, or both, in the Salu a Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as agent I am farmar with, any or the statement of the purpose of changing its office or registered again.								nt as regis	tered	
SIGNATURE Superfure, typod or printed name of registered agent and title il applicable (NOTE Registered Agent signature requir							/	5.98		
12		Callina, typod to printed.	OFFICERS AND D		13.	re required	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRE	CTORS IN	12
TITL	.E	PD		☐ DELETE	1.1 TITLE	PD	7.7	<b>∠2</b> ch		Addition
NAI		O'HARA, BRAIN			1.2 NAME	100	urtis GUNDER	سحن الآر		
4	REET ADDRESS Y-ST-ZIP	106 CURACAO BONITA SPRIM			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	47	39 RIVERSIDE DR STERO, FL 3	3928		
TITE		VPD	<u></u>	☐ DELETE	2.1 TITLE	VPD	0.1//	☐ Ch	ange	Addition
NAI	VIE .	GUNDER, CUR			22 NAME		BRIAN O'HARA	•		
	IEET ADDRESS	4739 RIVERSID	E DRIVE		2 3 STREET ADDRESS	10	6 CURACAO LANE	دستار دستار	( 3./1	. 3./
CIT	Y-ST-ZIP E	ESTERO FL		DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	-	BON ITA SPRI	NS >, P	- 591	Addition
NAJ		HARVEY, DEBB	Æ		3 2 NAME		ARENCE BANIST		ago	riodilion
STR	EET ADDRESS	27459 POLLAR	d drive		3.3 STREET ADDRESS	,	3627 QUAILS W	ALK		
	Y-ST-ZIP	BONITA SPRIN	3S FL		3.4. CITY-ST-ZIP	ļ	BINITA SPRIN	GS FL		134
TITL		S MADTINGALE A	AALIDAGE	☐ DELETE	4.1 TITLE	S	D = D = 0 + 0 P V	<b>₩</b> Ch	ange 📙	Addition
NAM	EET ADDRESS	MARTINSALE, M 1243 WINDSWE			4. 2 NAME 4.3 STREET ADDRESS		BERT CLARK 1701 SUNGATE	a7 ·		
	Y-ST-ZIP	NAPLES FL	, i Albioc		4.4 CITY-ST-ZIP		STERO, FL 33			
TITE				☐ DELETE	5.1 TITLE	<del>  _</del>	(-132) /	☐ Ch	ange 🔲	Addition
NAM					5.2 NAME					
	EET ADORESS				5.3 STREET ADDRESS					
TITL	Y-ST-ZIP	<del></del>		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	+		☐ Ch	anne 🗖	Addition
NAA					6.2 NAME					. 400111011
	EET ADDRESS				6.3 STREET ADDRESS					
CITY	Y - ST - 71P				6.4 CITY - ST- ZIP	1				

14. I 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 eport as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an affactment with an address.

SIGNATURE:

CURTIS GUNDER 1/5/98

947-5982

**FILED**