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Mar 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N18656** (1)

1. Corporation Name

CHRISTIAN FELLOWSHIP AT CLEARWATER, INC.

Principal Place of Business

Mailing Address

**1050 KAPP DRIVE
CLEARWATER FL 34625
US**

**1867 BRENTWOOD
CLEARWATER FL 34624-4603**

3. Date Incorporated or Qualified

01/08/1987

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

21 1867 Brentwood Drive

Suite, Apt. #, etc.

22 N/A

City & State

23 Clearwater, Florida

Zip

24 33764-4603

Country

25 USA

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29 33764-4603

Country

30

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MAQUIRE, PATRICK T.
308 N. BELCHER RD.
CLEARWATER FL 34625**

33765

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 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 617.0503, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

02/18/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **DV**
STREET ADDRESS **WOOD, STEPHEN**
CITY-ST-ZIP **1929 RIDGEWOOD ST**
CLEARWATER FL

TITLE ☐ DELETE

NAME **D**
STREET ADDRESS **O'DELL, JAMES P.**
CITY-ST-ZIP **912 PINELLAS ST**
CLEARWATER FL

TITLE ☐ DELETE

NAME **DS**
STREET ADDRESS **HUNT, FRANK J.**
CITY-ST-ZIP **1822-3 BOUGH AVE**
CLEARWATER FL

TITLE ☐ DELETE

NAME **PTD**
STREET ADDRESS **O'DELL, PAUL H.**
CITY-ST-ZIP **1867 BRENTWOOD**
CLEARWATER FL

TITLE ☐ DELETE

NAME **D**
STREET ADDRESS **LEGG, WILLIAM A.**
CITY-ST-ZIP **14325 SHANGRILA LANE**
ODESSA FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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:

[Signature]

February 23, 1998

CR2E037 (10/97)