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FILED

Apr 30 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N18763

(5)

1. Corporation Name

ONECO CHURCH OF CHRIST INC.

Principal Place of Business

1803 53RD AVENUE E.  
P O BOX 177  
ONECO FL 34264

Mailing Address

1803 53RD AVENUE E.  
P O BOX 177  
ONECO FL 34264-0177

3. Date Incorporated or Qualified

02/01/1987

3a. Date of Last Report

06/07/1996

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

COLLINS, EDWIN H.  
1803 53RD AVENUE E.  
BRADENTON FL 34264

10. Name and Address of New Registered Agent

81 Name

COOLEY, W. TRACY, SR.

82

Street Address (P.O. Box Number is Not Acceptable)  
904 CYPRESSWOOD LANE

83

84 City

SARASOTA,

FL

85

Zip Code  
34243

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 obligation of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

GREEN, B. CLYDE  
4418 37TH STREET E.  
BRADENTON FL☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

COOLEY, W. TRACEY, SR.  
904 CYPRESSWOOD LANE  
SARASOTA FL☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

TRAMEL, TERRY Y.  
15732 WILSON ROAD  
SARASOTA FL☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0083906

CR2E037 (9/96)