NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## 1999 DOCUMENT # N25681

Corporation Name

FIRST CHRISTIAN INTERDENOMINATIONAL ASSEMBLY OF FELLOWSHIP, INC.

Principal Place of Business
C/O CHRISTINE HENRY NATTIEL

C/O CHRISTINE HENRY NATUEL 817 SW 143RD ST GAINESVILLE FL 32669 Mailing Address

C/O CHRISTINE HENRY NATTIEL 817 SW 143RD ST GAINESVILLE FL 32669

## FILED Feb 17, 1999 8:00am Secretary of State

02-17-1999 90058 023 \*\*\*\*70.00



Principal Place of Business     2a. Mailing Address							3.	Date Incorporated or Qualifer	<del>j</del> .				
21	<u> </u>	26						03/30/1988			<del></del>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				4.	FO 020000		L		lied For	
22		27						<b>58-8320008</b>				Applicable	
City & State			City & State			5.	Certificate of Status Desired	₩.	-		dditional		
23			28							-	ee Req		
Zip	Country	$\perp$	Zip	Country			6.	6. Election Campaign Financing 55.00 May E					
24 25 29 30							Trust Fund Contribution				Added to Fees		
Name and Address of Current Registered Agent						NI	10. Name and Address of New Registered Agent						
*				8	1	Name			•		4	, *	
NATTIEL, CHRISTINE HENRY					2	Street Add	Street Address (P.O. Box Number is Not Acceptable)						
817, SW 143RD					_								
GAINES	VILLE FL 32669			8	3						j.		
,				8	4	City				85	Zip C	ode .	
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11. Pursua	unt to the provisions of Sections 617.0502 or registered agent, or both, in the State of	2 and 6	17.1508, Florida Statutes	s, the abo	ve-	named corp	oratio	on submits this statement for th	e purpose of	chang	ing its r	egistered	
office c	ir registered agent, or both, in the State of I am familiar with, and accept the obligat	of Floric	a. Such change was aut Section 617.0503, Florid	inonzeu b da Statute	ıyıı ∋s	ne corporati	OHSU	Dodici of cliectors. Intereby acco		5 EUF	a sit kir.	1 8/26 15 (	
-													
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered						signature require			DATE	D D D	FOTO	20 11 40	
12. OFFICERO AND DIRECTORS					13.			ADDITIONS/CHANGES TO O	FFICERS AN			Addition	
TITLE	D		☐ DELETE	1.1 TITLE				607 Fig. 81.8			lange	☐ Addition	
NAME	NATTIEL, CHRISTINE HENRY			1,2 NAME	E			er de later man des A					
STREET ADDRE	i i			1.3 STRE	ET/	ADDRESS		19 3630300		•			
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TITLE	D		☐ DELETÉ	2.1 TITLE	•						iange	Addition	
NAME	NATTIEL, DOROTHY JEAN			2.2 NAME	E	ļ					4	•	
STREET ADDRE	ss 817 SW 143RD ST			2.3 STRE	ET	ADDRESS					힐		
CITY-ST-ZIP	GAINESVILLE FL			2. 4 CiTY	-ST	r-ZIP							
TITLE	D		☐ DELETÉ	3.1 TITLE	•						nange	Addition	
NAME	NATTIEL, TIMOTHY DAVID		. • •	3.2 NAME	E						41 41	1-5	
STREET ADDRE	817 SW 143RD ST			3.3 STRE	EΤ	ADDRESS					,		
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NAME	* * * * * * * * * * * * * * * * * * * *			4, 2 NAM	Œ			1 : 10 : 48191	·卢(数多50分)	. 8473	E19.( \$19)	र हेम्ब्रस १५४।	
STREET ADORE				4.3 STRE	ET.	ADDRESS							
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TITLE	\$357 TO 5 2 White		☐ DELETE	6.1 TITLE						□ c	hange	☐ Addition	
NAME	817 S.R. 1 TYL C1		•	6.2 NAME	E								
	- Sec. 3 125 1		•	6.3 STRE	ET.	ADDRESS							

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: SIGNATURE NAME OF SIGNING OFFICER OR DIRECTOR Christiane Hours NA HICK

POEN27 (11/08)