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May 09 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # N36067 (9)

1. Corporation Name  
CHURCH OF CHRIST ENGLEWOOD EAST, INC.



Principal Place of Business  
9600 GULFSTREAM BLVD  
ENGLEWOOD FL 34224  
US

Mailing Address  
9600 GULFSTREAM BLVD  
ENGLEWOOD FL 34224-9256  
US

3. Date Incorporated or Qualified 01/10/1990  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number 65-0161494  
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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLFF, CHARLES L.  
19 BUNKER PLACE  
ROTONDA FL 33947

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 CHARLES L. WOLFF, Charles L. Wolff PRES.

4-24-97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DS ☒ DELETE  
NAME RATLIFF, CAROLYN S.  
STREET ADDRESS P O BOX 1366 N/A  
CITY-ST-ZIP ENGLEWOOD FL

1.1 TITLE DS ☒ Change ☐ Addition  
1.2 NAME MCALEB, KATE  
1.3 STREET ADDRESS 3081 HOLLY AVE.  
1.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

TITLE DV ☒ DELETE  
NAME MARCUM, C A  
STREET ADDRESS 644 DOLPHIN RD  
CITY-ST-ZIP VENICE FL

2.1 TITLE DV ☒ Change ☐ Addition  
2.2 NAME WHITTINGTON, WAYNE  
2.3 STREET ADDRESS 1060 HUMBOLDT ST.  
2.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

TITLE DT ☒ DELETE  
NAME RATLIFF, CAROLYNN S.  
STREET ADDRESS P O BOX 1366 N/A  
CITY-ST-ZIP ENGLEWOOD FL

3.1 TITLE DT ☒ Change ☐ Addition  
3.2 NAME GREGORY, DAVID  
3.3 STREET ADDRESS 2549 ROXBURY CIR.  
3.4 CITY-ST-ZIP NORTH PORT, FL 34287

TITLE DP ☐ DELETE  
NAME WOLFF, CHARLES L.  
STREET ADDRESS 19 BUNKER PLACE  
CITY-ST-ZIP ROTONDA FL

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE DV ☒ DELETE  
NAME MARCUM, C. A.  
STREET ADDRESS 664 DOLPHIN ROAD  
CITY-ST-ZIP VENICE FL

5.1 TITLE DV ☒ Change ☐ Addition  
5.2 NAME WHITTINGTON, WAYNE  
5.3 STREET ADDRESS 1060 HUMBOLDT ST.  
5.4 CITY-ST-ZIP ENGLEWOOD, FL 34224

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

CR2E037 (9/96)