

FILE NOW: FILING FEE IS \$61.25

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Mar 27 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 # **N37325** (0)

1. Corporation Name

CHRISTHAVEN FELLOWSHIP OF PEACE, INC.



Principal Place of Business 21306 MEEHAN AVE PT CHARLOTTE FL 33952 US		Mailing Address 21306 MEEHAN AVE PT CHARLOTTE FL 33952 US		3. Date Incorporated or Qualified 03/23/1990	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0238097	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip		28 Zip		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country		30 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GREEN, JESSE W 124 NW MEEHAN AVE PORT CHARLOTTE FL 33952		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		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 *Jesse W Green* DATE *March 24, 1998*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, JESSE W.	1.2 NAME	
STREET ADDRESS	124 N.W. MEEHAN AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PORT CHARLOTTE FL	1.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOICOECHEA, JENNIE S	2.2 NAME	
STREET ADDRESS	170 SW 51ST TERR	2.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRECO, JOAN	3.2 NAME	
STREET ADDRESS	610 VICTORIA DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN, JESSE W	4.2 NAME	
STREET ADDRESS	124 NW MEEHAN AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PORT CHARLOTTE FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATTISTA, CATHERINE	5.2 NAME	
STREET ADDRESS	628 SE 19TH LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAHAN, BART	6.2 NAME	
STREET ADDRESS	1815 SE 11TH AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL	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: *Jesse W Green* DATE: *March 24, 1998*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/97)