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Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90008 048 ****61.25

066219

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N42296

1. Corporation Name

MCKEE LAKE ALLIANCE CHURCH OF THE CHRISTIAN AND
MISSIONARY ALLIANCE, INC.

Principal Place of Business

5972 62ND AVE. NORTH
PINELLAS PARK FL 34665

Mailing Address

5972 62ND AVE. NORTH
PINELLAS PARK FL 34665



2. Principal Place of Business

2a. Mailing Address

3. Date incorporated or Qualified

21

26

02/25/1991

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

Applied For

22

27

59-2392404

Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23

28

Zip

Country

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRYANT, DANN
5972 62ND AVE. NORTH
PINELLAS PARK FL 34665

81 Name

Franklin D. Jones

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

4860 47th Ave. N.

83

84 City

St. Petersburg

FL

85 Zip Code

33714

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 F. DALE JONES

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

F. Dale Jones, Trustee

3/23/99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T DELETE

NAME THOMAS ROBERTSON

STREET ADDRESS 1310 - 39TH AVE N

CITY-ST-ZIP ST PETERSBURG FL

T DELETE

NAME F. DALE JONES

STREET ADDRESS 4860 47TH AVE N

CITY-ST-ZIP ST. PETERSBURG FL 33714

T DELETE

NAME WILLIAM COLPITTS

STREET ADDRESS 9790 66TH ST N #274

CITY-ST-ZIP PINELLAS PARK FL 33782

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE Change Addition

1.2 NAME

T Richard Martin

1.3 STREET ADDRESS

10398 106th Ave. N.

1.4 CITY-ST-ZIP

Largo, Florida 33773

2.1 TITLE Change Addition

2.2 NAME

~~Dann Bryant~~ *ADD*

2.3 STREET ADDRESS

~~7024 122nd Way N.~~ *ADD*

2.4 CITY-ST-ZIP

~~Seminole, Florida 33773~~ *ADD*

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, with all other like empowered.

SIGNATURE:

F. Dale Jones SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JONES

3/23/99

Date

(727) 302-7275

Daytime Phone #

CR2E037 (1/98)