FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
97 JUN 16 AM 11:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **N42686** **(8)**

1. Corporation Name
CHRISTIAN FELLOWSHIP ALIVE MINISTRIES, INC.

Principal Place of Business	Mailing Address
2322 MASLAN AVE SE PORT ST LUCIE FL 34952 US	PO BOX 8422 PORT ST LUCIE FL 34985-8422 US

3. Date Incorporated or Qualified: 03/21/1991
3a. Date of Last Report: 04/29/1996

2. Principal Place of Business
21 2280 S.E. Lucaya St.
Suite, Apt. #, etc. 22
City & State 23 Port St. Lucie, FL.
Zip 24 34952 Country 25 St. Lucie

2a. Mailing Address
26 P.O. Box 8422
Suite, Apt. #, etc. 27
City & State 28 Port St. Lucie, FL.
Zip 29 34985-8422 Country 30 St. Lucie

4. FEI Number: 59-3058824 ☐ 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

BAUMGARDNER, MICHAEL A.
6109 CREWS LAKE RD
LAKELAND FL 33813

10. Name and Address of New Registered Agent

81 Name: Michael A. Baumgardner
82 Street Address (P.O. Box Number is Not Acceptable): 2280 S.E. Lucaya St.
83
84 City: Port St. Lucie FL 85 Zip Code: 34952

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 Michael A Baumgardner Pres. 4/21/97
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	PD	☐ DELETE	1.1 TITLE	PD ☑ Change ☐ Addition
NAME	BAUMGARDNER, MICHAEL A. Same		1.2 NAME	Baumgardner, Michael A.
STREET ADDRESS	~~6109 CREWS LAKE RD~~ 2280 S.E. Lucaya St		1.3 STREET ADDRESS	2280 S.E. Lucaya St.
CITY-ST-ZIP	~~LAKELAND FL~~ Port St. Lucie, FL. 34952		1.4 CITY-ST-ZIP	Port St. Lucie, FL. 34952
TITLE	V	☑ DELETE	2.1 TITLE	V T ☑ Change ☐ Addition
NAME	BAUMGARDNER, JASON TODD		2.2 NAME	Baumgardner, Joyce
STREET ADDRESS	2322 MASLAN AVE. S.E.		2.3 STREET ADDRESS	2280 S.E. Lucaya St.
CITY-ST-ZIP	PORT ST. LUCIE FL		2.4 CITY-ST-ZIP	Port St. Lucie, Fl. 34952
TITLE	ST	☑ DELETE	3.1 TITLE	S ☑ Addition
NAME	BAUMGARDNER, BRENDA JOYCE		3.2 NAME	Baumgardner, Tracy L.
STREET ADDRESS	~~6109 CREWS LAKE ROAD~~ Same →		3.3 STREET ADDRESS	3282 McMaster Ave.
CITY-ST-ZIP	~~LAKELAND FL~~ Change of address		3.4 CITY-ST-ZIP	Port St. Lucie, FL. 34952
TITLE	D	☑ DELETE	4.1 TITLE	☐ Change ☑ Addition
NAME	PEYTON, ROBERT BENJAMI		4.2 NAME	
STREET ADDRESS	802 HEADROW TERRACE		4.3 STREET ADDRESS	
CITY-ST-ZIP	HAMPTON VA		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	700002215981 ☐ Change ☐ Addition
NAME			5.2 NAME	-06/18/97--01053---001
STREET ADDRESS			5.3 STREET ADDRESS	*****8.75 *****8.75
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	$61.25 Bank

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)