

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR 23 PM 4:18

DOCUMENT # **N43943** (2)

1. Corporation Name

CHARIS CHRISTIAN FELLOWSHIP, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

12350 SW 132 ST
S12
MIAMI FL 33186
US

13876 SW 56 ST
S136
MIAMI FL 33175
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/17/1991	3a. Date of Last Report 03/08/1994
4. FEI Number 65-0418847	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 2a. Mailing Address

21 **12350 SW 132 CT,**

26

Suite, Apt. #, etc.
22 **S104**

27 Suite, Apt. #, etc.

City & State
23 **MIAMI, FL**

28 City & State

Zip
24 **33186**

Country
25 **U.S.A.**

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**HOLBROOK, JOSEPH L
25505 SW 126 CT
PRINCETON FL 33032**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Joseph L. Holbrook DATE: 2-11-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	PP
NAME	HOLBROOK, JOSEPH REV.	12 NAME	Joseph Holbrook
STREET ADDRESS	25595 SW 126 ST	13 STREET ADDRESS	25505 SW 126 CT
CITY- ST- ZIP	PRINCETON FL	14 CITY- ST- ZIP	PRINCETON, FL 33032
TITLE	D	21 TITLE	VD
NAME	BIGGS, EDWARD	22 NAME	Hector Santiago
STREET ADDRESS	13870 S.W. 62ND STREET, #101	23 STREET ADDRESS	17304 SW 108 CT.
CITY- ST- ZIP	MIAMI FL	24 CITY- ST- ZIP	MIAMI, FL 33157
TITLE	D	31 TITLE	D
NAME	BUSSE, JIM	32 NAME	Jim BULKLEY
STREET ADDRESS	7451 S.W. 133RD AVENUE	33 STREET ADDRESS	6634 SW 114 Place A
CITY- ST- ZIP	MIAMI FL	34 CITY- ST- ZIP	MIAMI, FL 33173
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY- ST- ZIP		44 CITY- ST- ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY- ST- ZIP		54 CITY- ST- ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY- ST- ZIP		64 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on the 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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joseph L. Holbrook
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR