FILE NOW: FILING FEE IS \$61.25

FILED May 09 1997 8:00am NONPROFIT FLORIDA DEPARTME OF STATE CORPORATION Sandra B. Md ham **ANNUAL REPORT** Secretary of State Secretary of DIVISION OF CORP 1997 RIONS DOCUMENT # N47715 (0)JACKSON HEIGHTS CHURCH OF CHRIST INCORPORATED Principal Place of Business Mailing Address 3817 E. LINDELL AVE. 3817 E. LINDELL AVE. TAMPA FL 33610-8038 TAMPA FL 33610 3. Date Incorporated or Qualified 03/06/1992 05/01/1996 Principal Place of Business Mailing Address 4. FEI Number Applied For 59-3114005 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes 24 29 30 Florida Statutes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SUTTLE, MARCUS T. 82 Street Address (P.O. Box Number is Not Acceptable) 1303 EAST 32ND AVENUE 83 **TAMPA FL 33603** R4 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 printing with, and accept the abbigance of Section 617.0503, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE SUTTLE, MARCUS T. 12 NAME NAME 1303 E. 32ND AVE 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP SD DELETE ___ Change Addition TITLE 2.1 TITLE SUTTLE, JAMES JR. NAME 22 NAME 3005 E. 23RD AVENUE 23 STREET ADDRESS STREET ADDRESS **TAMPA FL 33605** CITY-ST-ZIP 2, 4 CITY- \$1-ZIP ■ DELETE 3.1 TITLE Change Addition TITLE TD SUTTLE, GREGORY B. NAME 32 NAME 4705 ASHMORE DRIVE STREET ADDRESS 3,3 STREET ADDRESS TAMPA FL CITY-ST-ZiP 3,4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF 4/4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5,2 NAME NAME STREET ADDRESS 5/3 STREET ADDRESS 5,4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

U-22-97

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 receivor 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.

CITY-ST-ZIF