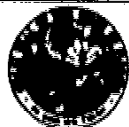


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 27 PM 3:19

DOCUMENT # **N49519** (4)

1. Corporation Name

CHRISTIANS FOR RENEWED FAMILY VALUES, INC.

Principal Place of Business

Mailing Address

% WILLIAM D. MILLER
6641 MANGO AVE S
ST. PETERSBURG FL 33707

% WILLIAM D. MILLER
6641 MANGO AVE S
ST. PETERSBURG FL 33707

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/23/1992

3a. Date of Last Report
10/05/1994

4. FEI Number

59-3135392

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, WILLIAM D.
6641 MANGO AVENUE SOUTH
ST. PETERSBURG FL 33707

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0502, Florida Statutes.

SIGNATURE

William D. Miller
Signature (typed or printed name of registered agent and fee is applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

2-16-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

MILLER, WILLIAM D.
6641 MANGO AVE S.
ST. PETERSBURG FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

SD

NAME

CHURCH, ALLEN M.
124 44TH AVE
ST. PETERSBURG FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

TD

NAME

MILLER, SUSAN D.
6641 MANGO AVE S.
ST. PETERSBURG FL

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

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43 STREET ADDRESS

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64 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 110.07(3)(b), 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 owner or 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 of this report or on a supplemental report with an address.

SIGNATURE:

William D. Miller
Signature and typed or printed name of signing officer or director

2-16-95

813 343-6702