FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1000	
DOCUMENT # 1. Corporation Name	N495

(2)

TERRACE PALMS COMMUNITY CHURCH, INC.

IERNAOI	E PALIAS COMMIDITITI	71011014 HO.				
Principal Place o	of Business	Mailing Address				
7601 56 ST TAMPA FL 3360		PO 290014 TAMPA FL 33687				
US		US				3. Date Incorporated or Qualified 06/22/1992 3a. Date of Last Report 05/01/1995
2. Principal Place	ce of Business	2a. Mailing Address				4. FEI Number Applied For Not Applied For
21		26		-		
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip		untry		8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30			Florida Statutes Yes No 10. Name and Address of New Registered Agent
	9. Name and Address of Curr	ent Registered Agent		81	Name	
NIOCE W	MILIAM E ID			Ш		
	/ILLIAM F., JR. SITKA STREET			82	Street	et Address (P.Ö. Box Number is Not Acceptable)
TAMPA F				83		
I FAMILY I	L 00004			84	City	FI 85 Zip Code
		soo Lora 4500 Etrida Statu	too the et	<u> </u>	amod c	corporation submits this statement for the purpose of changing its registered off
er registers	ad accort or both in the State of H	innaa. Siich charius was auulula	ZOOL DY HIN	corp	oration's	's board of directors. I hereby accept the appointment as registered agent. I am
familiar with	h, and accept the obligations of, Si	ection 617.0303, Florida Statute	<i></i>	_		1 - 24-96
SIGNATURE 4	Signature, typed or printed name of registered a	Hus II. W	/////A	PO Ager	nt signature	
12,	Signature, typed or printed name or registered at OFFICERS	AND DIRECTORS"	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1	TITLE		GROWEY, Prop B. Down Addition
NAME	FRAZIER, SIMEON L.	,,,	1.2	NAME		
STREET ADDRESS	1503 GERTRUDE DRIVE		1.3	STREET	ADDRESS	s
CITY-ST-ZIP	BRANDON FL			CITY-5	ST-ZIP	Change Additio
TRILE	D	□ D£LET€		TITLE		D/V/S Change MAddition Brishkey Fried B. 2901 SILVEN LAKE AVE.
NAME	HIRES, WILLIAM F., JR.			NAME	, IDDDCCC	BREAKET ILVEN LAKE AVE.
STREE1 ADDRESS	1809 W. SITKA ST. TAMPA FL				r address	TAMPA FL 33614
CITY - ST - ZIP	D/P/7	DELETE		4 CITY-	51-ZIP	☐ Change Additio
TITLE	KEOUGH, TRACY JOHN			NAME		FONSECA ANTHONY 8718 N. WHITTIER ST.
NAME OVERTA ADDRESS	1819 JAM LANE		3.3	3 STREE	T ADDRESS	8718 N. WHITTIER ST.
STREET ADDRESS	ODESSA FL		3	4. CITY-	ST-ZIP	TAMPA, 1-12 33811
CITY-ST-ZIP TITLE		DELETE	4.1	1 TITLE		☐ Change ☐ Addition
NAME				2 NAME		
STREET ADDRESS			4.	3 STREE	T ADDRESS	SS
CITY - ST - ZIP					ST-ZIP	Charge Addition
TITLE		DEFFELE	- I	1 TITLE		
NAME				2 NAME		cc
STREET ADDRESS				3 STREE 4 CITY-	T ADDRESS	30
CITY-ST-ZIP		DELETE		4 CHY- 1 THILE		☐ Change ☐ Addition
TITLE				2 NAME		
NAME CTOCCT ADDOCCC					Et addres:	iss
STREET ADDRESS	1		١,	4 CITY	ST. 71P	
14. I do heret	by certify that the information supp	lied with this filing is voluntarily fu	urnished a	nd do	es not q	qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I furthed accurate and that my signature shall have the same legal effect as if made under this report as required by Chapter 617, Florida Statutes; and that my name
certify that	at the information indicated on this till am an officer or director of the cin Block 12 or Block 13 if changed	annual report of supplemental all corporation or the receiver or trust, or on an attachment with an ac	stee empo ddress.	werec	to exec	d accurate and that my signature share have the sain regarded to the that my name acute this report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE: William F. Hires, Jr. 4-24-96 (813) 985-927

CR2E037 (12/95)