SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 5/5/95: $133 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $288)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED

95 JUN 19 PM 6:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N93000000599 (1)**

1. Corporation Name

CORAL COAST CHURCH OF CHRIST, INC.

Principal Place of Business	Mailing Address
~~690 FAIRWAY DRIVE~~ ~~PLANTATION FL 33317~~	~~690 FAIRWAY DRIVE~~ ~~PLANTATION FL 33317~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/12/1993
3a. Date of Last Report: 05/13/1994
4. FEI Number: 65-0465803 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ FILING FEE IS $61.25
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 c/o SDA FT LAUD.	26 54 NW 6 Ave
Suite, Apt. #, etc: 22 (Rented church Bldg)	Suite, Apt. #, etc: 27
City & State: 23 850 SW 9 Ave. FT. LAUDERDALE, FL.	City & State: 28 Boca Raton, FL
Zip: 24 33315 Country: 25 USA	Zip: 29 33432 Country: 30 USA

9. Name and Address of Current Registered Agent

DAVIDSON ROBERT
~~690 FAIRWAY DRIVE~~
~~PLANTATION FL 33317~~

10. Name and Address of New Registered Agent

81 Name: Robert DAVIDSON
82 Street Address (P.O. Box Numbers Not Acceptable): 54 NW 6 Ave
83
84 City: Boca Raton, FL FL 85 Zip Code: 33432

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	ROTH, RON	12 NAME	700001518527
STREET ADDRESS	5740 SW 54 COURT	13 STREET ADDRESS	-06/20/95--01113--022
CITY-ST-ZIP	DAVIE FL 33314	14 CITY-ST-ZIP	*****70.00 *****70.00
TITLE	SD	21 TITLE	☐ Change ☐ Addition
NAME	SAXON, VAN	22 NAME	
STREET ADDRESS	11180 NW 36 CT.	23 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	D ☑ Change ☐ Addition
NAME	~~STANFORTH, CRAIG~~ KRAIG	32 NAME	STANFORTH, KRAIG
STREET ADDRESS	~~275 SOMERSET WAY~~	33 STREET ADDRESS	490 NW 6 Ave
CITY-ST-ZIP	~~FT LAUDERDALE FL 33326~~	34 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	D	41 TITLE	D ☑ Change ☐ Addition
NAME	MAHFOOD, DALE	42 NAME	Mahfood, Dale
STREET ADDRESS	~~275 SOMERSET WAY~~	43 STREET ADDRESS	2220 Tallahassee
CITY-ST-ZIP	~~FT LAUDERDALE FL 33326~~	44 CITY-ST-ZIP	Fort Lauderdale, FL 33326
TITLE	TD	51 TITLE	TD ☑ Change ☐ Addition
NAME	DAVIDSON, ROBERT	52 NAME	Robert DAVIDSON
STREET ADDRESS	~~690 FAIRWAY DRIVE~~	53 STREET ADDRESS	54 N W 6 Ave.
CITY-ST-ZIP	~~PLANTATION FL 33317~~	54 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E037 (3/95)

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)(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.

SIGNATURE: Robert J. Davidson Robert J. DAVIDSON 6/10/95 407 362-7416
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0010224