SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $115 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $395)

NONPROFIT CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 JUN -? AM 9:14
SEC... TALL... FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # N93000000625 (4)

1. Corporation Name

CHURCH ON THE ROCK NAPLES, INC.

Principal Place of Business	Mailing Address
3270 FIRST AVE NW NAPLES FL 33964	3270 FIRST AVE NW NAPLES FL 33964

3. Date Incorporated or Qualified: 02/15/1993
3a. Date of Last Report: 04/25/1994
4. FEI Number: 65-0392464 — Applied For / Not Applicable

2. Principal Place of Business
21 3842 Exchange Ave
22 Suite, Apt. #, etc.
23 City & State: Naples, FL
24 Zip: 33942
25 County: Collier

2a. Mailing Address
26 3842 Exchange Ave
27 Suite, Apt. #, etc.
28 City & State: Naples, FL
29 Zip: 33942
30 County: Collier

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 taken, or intends to take, tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

TERNDRUP, CRAIG A
3270 FIRST AVE NW
NAPLES FL 33964

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City FL
65 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 familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE ______ 6-23-95
Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO 12. OFFICERS AND DIRECTORS	
TITLE	D	1 TITLE	☐ Change ☐ Addition
NAME	TERNDRUP, CRAIG A	1 NAME	
STREET ADDRESS	3270 FIRST AVE NW	1 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33964	1 CITY-ST-ZIP	
TITLE	D	2 TITLE	☐ Change ☐ Addition
NAME	WARNOCK, CHUCK	2 NAME	
STREET ADDRESS	3270 FIRST AVE NW	2 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33964	2 CITY-ST-ZIP	
TITLE	D	3 TITLE	☐ Change ☐ Addition
NAME	ALEXANDER, DANNY	3 NAME	
STREET ADDRESS	2234 CORAL POINT DR	3 STREET ADDRESS	
CITY-ST-ZIP	CAPE CORAL FL 33990	3 CITY-ST-ZIP	
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 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)(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: Craig Terndrup
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-23-95 941-263-0997
Date / Daytime Phone #

CR2E037 (3/95)

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