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May 08 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N93000000779 (9)

1. Corporation Name

CHURCH OF CHRIST AT 1120 SOUTH THOMPSON AVENUE,
DELAND, FLORIDA INCORPORATED

Principal Place of Business

Mailing Address

1120 S THOMPSON AVE
DELAND FL 32720

1120 S. THOMPSON AVE.
DELAND FL 32720

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

3. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/04/1993

4. FEI Number

59-2483282

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

MOBLEY, WILLIAM JR
101 ALEHTA DR
DAYTONA BEACH FL 32114

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 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S ☐ DELETE

NAME MOBLEY, STACEY
STREET ADDRESS 1645 DUNLAWTON AVE 1022
CITY-ST-ZIP PORT ORANGE FL

TITLE VP ☒ DELETE

NAME HOUSTON, LEROY
STREET ADDRESS 629 CEONE PARK DR
CITY-ST-ZIP DAYTONA BEACH FL

TITLE PT ☐ DELETE

NAME MOBEY, WILLIAM A JR
STREET ADDRESS 101 ALEHTAN DR
CITY-ST-ZIP DAYTONA BEACH FL

TITLE D ☐ DELETE

NAME MOBLEY, STACEY L
STREET ADDRESS 101 ALEHTA DR
CITY-ST-ZIP DAYTONA BCH. FL 32114

TITLE D ☒ DELETE

NAME LANE, TERRY
STREET ADDRESS 1113 SO DELAWE AVE
CITY-ST-ZIP DELAND FL 32720

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME MOBLEY, STACEY
1.3 STREET ADDRESS 1494 SWIREY PARK DR
1.4 CITY-ST-ZIP PORT ORANGE, FL 32124

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME MOBLEY, STACEY
2.3 STREET ADDRESS 1494 SWIREY PARK DR
2.4 CITY-ST-ZIP PORT ORANGE, FL 32124

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME TAYLOR, MICHAEL
5.3 STREET ADDRESS 2861 Sweet Springs ST.
5.4 CITY-ST-ZIP DELAND, FL 32738

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 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:

Signature of Stacey Mobley

4-24-98

904-322-7628

CR2E037 (10/97)