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Mar 16 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 # N93000001072 (8)

1. Corporation Name

CHRIST CHURCH OF FELLOWSHIP, INC.



Principal Place of Business		Mailing Address	
6011 103RD ST. 7 JACKSONVILLE FL 32210		6011 103RD ST. 7 JACKSONVILLE FL 32210	

3. Date Incorporated or Qualified	03/02/1993
4. FEI Number	59-3231609
Applied For	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

9. Name and Address of Current Registered Agent

POLITE, GREGORY R  
9616 SPOTTSWOOD RD W  
JACKSONVILLE FL 32208

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP POLITE, GREGORY R	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9616 SPOTTSWOOD RD W	1.2 NAME	
STREET ADDRESS	JACKSONVILLE FL 32208	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	DVP ROSIER, GREGORY S	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7032 DEAUVILLE RD	2.2 NAME	
STREET ADDRESS	JACKSONVILLE FL 32205	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	DS ROBINSON, AARON D.T.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8045 MACDOUGALL DR E	3.2 NAME	
STREET ADDRESS	JACKSONVILLE FL 32244	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	DT POLITE, DEBORAH	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	9616 SPOTTSWOOD	4.2 NAME	
STREET ADDRESS	JACKSONVILLE FL 32208	4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	DVT SHIDER, RONALD SR	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1044 BLUE HILL DR	5.2 NAME	
STREET ADDRESS	JACKSONVILLE FL 32218	5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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, 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: *Gregory R. Polite* 3/8/98 (904) 783-0668

CR2E037 (10/97)