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NONPROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N9300001649 (3)

COMMUNITY CHURCH DEVELOPMENT CORPORATION

Principal Pla 16990 SW . GOULDS FI US	•	-	1699	ing Address 90 SW 216 ST. ULDS FL 33170							
2. Principal	Place of Business		Tan W	- 61 4 11			3. Date Incorporated 04/13/199	f or Qualified 3	3a. Da	te of Le 5/01/	st Report 1995
21 16	990 SW 2	16 Stant		lailing Address 6990 SA	.1 4 1/2	nt 1	4. FEI Number 65-041130	ı c			Applied For
Suite, Ap	f. #, etc.	V Sauce	St	uite, Apt. #, etc.	L AID_	SMEET					Not Applicable
City & Sta	****		27				5. Certificate of State	us Desired			5 Additional Required
	OULDS F	21_		ity & State		·· ·	6. Election Campaign	Financing			00 May Be
Zip	C	ountry	28 Zıç	GOULDS,	J-L Coi	untry	Trust Fund Contrit	pution		Add	ed to Fees
24 33		US	29	33/20	30	US	8. This corporation has Florida Statutes	as liability for in	tanglble tax Yes 🔣 i	under (s. 199.032,
	9. Name and A	ddress of Current	t Registere	ed Agent			10. Name and Addre	ss of New Re	distered A	vo ment	
REDNE	CKER, DONALD				-	81 Name			Approved to	April	
	SW 216 ST					82 Street Ad	Mana /D A Boy Number in		·		
	S FL 33170				I		Address (P.O. Box Number is Not Acceptable)				
WOULD,	3 FC 93170					83					·
					ļ	84 City				· · · · · · · · · · · · · · · · · · ·	
11. Pursuant	to the provisions of (S 017 0500			ı	1,			Fi	85 Z	p Code
or registe	red agent, or both, in	the State of Florida	and 617,16 a. Such cha	-08, Florida Statut ange was authoriz	es, the abored by the c	ve-named corporation's bo	oration submits this stateme ard of directors. I hereby acc	nt for the purpo	se of chang	ging its	realstered office
Editioned by	ith, and accept the o	oligations of, Section	n 617.0503	3, Florida Statuter	, ou o,	ουρυιαποί το μο	ard of directors, i hereby acc	ept the appoin	itment as re	gistered	i agent. I em
A											
SIGNATURE	Storiature, typed or printed in	are of repletance arrent ar	of call of manufactor								
SIGNATURE	Signature, typed or printed i	ame of registered agent an OFFICERS AND I	nd tille if applica	atile (NC		Agent signature requir			DATE		721212
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