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Jun 09 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N93000002825 (8)

1. Corporation Name

CHRISTIAN GIRLS CLUB, INC.

Principal Place of Business

Mailing Address

9431 THOMAS DUKES COURT
JACKSONVILLE FL 32219
US

P.O. BOX 9665
JACKSONVILLE FL 32208-0665
US



3. Date Incorporated or Qualified
06/17/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

Anita C. Allen Anita Allen, Director

5-28-97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T ☐ DELETE
NAME WILLIAMS, BEULAH
STREET ADDRESS 9030 DAMES POINT RD
CITY-ST-ZIP JACKSONVILLE FL

VP ☐ DELETE
NAME ALLEN, WILNITA T
STREET ADDRESS 9431 THOMAS DUKES COURT
CITY-ST-ZIP JACKSONVILLE FL 32219

D ☐ DELETE
NAME ASHLEY, CAROLYN
STREET ADDRESS 4824 PORTSMOUTH AVENUE
CITY-ST-ZIP JACKSONVILLE FL 32208

T ☐ DELETE
NAME NEAL, CAROLYN
STREET ADDRESS 6950 CHAMPLAIN DR.
CITY-ST-ZIP JACKSONVILLE FL 32208

PD ☐ DELETE
NAME ALLEN, ANITA
STREET ADDRESS 9431 THOMAS DUKES COURT
CITY-ST-ZIP JACKSONVILLE FL

S ☐ DELETE
NAME TROUP, VERONICA
STREET ADDRESS 3029 LAGNY DR.
CITY-ST-ZIP JACKSONVILLE FL 32208

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

CR2E037 (9/96)