

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jul 15, 1996 08:00 AM
Secretary of State

DOCUMENT # N93000003574 (1)

1. Corporation Name

COMMUNITY CHURCH OF WEST PALM BEACH, INC.

Principal Place of Business

431 WEST 30TH STREET
RIVIERA BEACH FL 33404

Mailing Address

431 WEST 30TH STREET
RIVIERA BEACH FL 33404

3. Date Incorporated or Qualified
08/05/1993

3a. Date of Last Report
08/16/1995

2. Principal Place of Business

21 2111 Broadway

Suite, Apt. #, etc.

22 City & State
Riviera Beach

23 Zip
33404

Country
P.A.M.B.C.

2a. Mailing Address

26 431-30th st

Suite, Apt. #, etc.

27 City & State
Riviera B. FL

28 Zip
33404

Country
P.B.C.

4. FEI Number
65-0434527

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

REGIS, ANTOINE REV
431 W. 30TH ST.
RIVIERA BEACH FL 33404

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

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 PD
NAME SLAYMAN, GLEN
STREET ADDRESS 12560 TIMBER PINE TRAIL
CITY - ST - ZIP WEST PALM BEACH FL 33414

TITLE D
NAME REGIS, ANTOINE REV.
STREET ADDRESS 431 W. 30TH STREET
CITY - ST - ZIP RIVIERA BEACH FL 33404

TITLE D
NAME REGIS, MARY
STREET ADDRESS 431 W. 30TH STREET
CITY - ST - ZIP RIVIERA BEACH FL 33404

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(k), 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0006654

CR2E037 (3/96)