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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # N93000005361 (1)

1. Corporation Name

BREAD OF LIFE CHRISTIAN MISSION, INC.

Principal Place of Business	Mailing Address
4288 HWY 92 WEST #7 PLANT CITY FL 33567	4288 HWY 92 WEST #7 PLANT CITY FL 33567-7731

3. Date Incorporated or Qualified: 11/29/1993
3a. Date of Last Report: 03/19/1996

2. Principal Place of Business	2a. Mailing Address
21 601 N. Michigan Ave.	26
22 Suite, Apt. #, etc.	27 P. O. Box 536
23 Plant City, FL	28 Plant City, FL
24 Zip 33566 25 Country	29 Zip 33864-0536 30 Country

4. FEI Number: 59-3194989 ☐ 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	10. Name and Address of New Registered Agent
SANTANA, JULIO A 4288 HWY 92 WEST SUITE 7 PLANT CITY FL 33567	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2436 Riverwood Dr. 83 84 City Mulberry FL 85 Zip Code 33860

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 Rev. Julio A. Santana, Director 5-1-97
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		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP THOMAS, TKACHUCK R 2401 S. PARK AVE. SANFORD FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV ALVAREZ, LOUIS 5905 MAR-JO DR TAMPA FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	DV James Bass 1103 N. Wheeler St. Plant City, FL 33566	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS ALVAREZ, XENIA 5905 MAR-JO DR TAMPA FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	DS Hallberg, Lorene 3209 Concord Way Plant City, FL 33566	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT FROSELL, KIM P'O BOX 3295 PALNT CITY FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SANTANA, JULIO A. R 4288 HWY 92 W #7 PLANT CITY FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/96)

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 receivor 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: Rev. Julio A. Santana 5-1-97 (813)754-2840