SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $139 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $315)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 20 AM 8:27

DOCUMENT # **N93000005515 (2)**

1. Corporation Name

CHRIST HOUSING AND MINISTRIES PROGRAMS, INC.

Principal Place of Business	Mailing Address
2009 20TH AVENUE WEST BRADENTON FL 34205	2009 20TH AVENUE WEST BRADENTON FL 34205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/30/1993
3a. Date of Last Report: 04/22/1994
4. FEI Number: 65-0451044 ☐ Applied For ☐ Not Applicable
2. Principal Place of Business (21):
2a. Mailing Address (26):
Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):
City & State (23):
City & State (28):
Zip (24) County (25) Zip (29) County (30)
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — FILING FEE IS $61.25
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
BURGESS, LETHA W 2009 20TH AVENUE WEST BRADENTON FL 34205	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	BURGESS, LETHA W	12 NAME	
STREET ADDRESS	2009 20TH AVENUE WEST	13 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34205	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	DUNLAP, NITA	22 NAME	
STREET ADDRESS	6310 26TH AVENUE WEST	23 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34209	24 CITY-ST-ZIP	
TITLE	D	31 TITLE	☒ Change ☐ Addition
NAME	SMOTHERS, MARY L	32 NAME	W. C. Smith
STREET ADDRESS	5004 25TH STREET WEST	33 STREET ADDRESS	808 53rd Avenue E. #100
CITY-ST-ZIP	BRADENTON FL 34207	34 CITY-ST-ZIP	Bradenton, Fl 34203
TITLE	D	41 TITLE	☒ Change ☐ Addition
NAME	WASSON, R. WARREN	42 NAME	Robert J. Waddell
STREET ADDRESS	1320 51ST STREET WEST	43 STREET ADDRESS	5728 21st Street West
CITY-ST-ZIP	BRADENTON FL 34209	44 CITY-ST-ZIP	Bradenton, Fl 34207
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	ALLERS, NORMAN T	52 NAME	John O. Stright
STREET ADDRESS	4728 NORTH TAMIAMI TRAIL	53 STREET ADDRESS	476 Palm Tree Drv.
CITY-ST-ZIP	SARASOTA FL 34234	54 CITY-ST-ZIP	Bradenton, Fl 34210
TITLE	D	61 TITLE	☒ Change ☐ Addition
NAME	WHATLEY, BOBBY N	62 NAME	Wayne Rowley
STREET ADDRESS	2819 51ST STREET WEST	63 STREET ADDRESS	2219 Holyoke Ave.
CITY-ST-ZIP	BRADENTON FL 34209	64 CITY-ST-ZIP	Bradenton, Fl 34207

CR2E037 (3/95)

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)(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.

SIGNATURE: Letha W. Burgess Chairperson — 6/15/95 — (940)746-3545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0016507