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May 05 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 # N94000000372 (2)

1. Corporation Name

THE HOME CHURCH OF CAPE CORAL, INC.

Principal Place of Business

4409 S.E. 16TH PL  
CAPE CORAL FL 33904

Mailing Address

4409 S.E. 16TH PL  
CAPE CORAL FL 33904-7473



3. Date Incorporated or Qualified  
01/26/1994

3a. Date of Last Report  
04/18/1996

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

65-0440497

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

City & State

22

City & State

27

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

Zip

Country

24

25

Zip

Country

29

30

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

EZELLE, CHARLES E  
4409 SE 16TH PLACE  
#9  
CAPE CORAL FL 33904

81 Name

Charles Ezelle II

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME EZELLE, CHARLES II  
STREET ADDRESS 1394 TORREYA CIRCLE  
CITY-ST-ZIP N. FT. MYERS FL 33917

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

TITLE D  
NAME MEYER, WILLIAM  
STREET ADDRESS 157 SW 51ST ST.  
CITY-ST-ZIP CAPE CORAL FL 33914

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

TITLE D  
NAME FRANKLIN, SANDRA J  
STREET ADDRESS 4477 ST. CLAIR AVE. W.  
CITY-ST-ZIP N. FT. MYERS FL 33903

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

TITLE D  
NAME EZELLE, CHARLES  
STREET ADDRESS 5301 CORTEZ CT  
CITY-ST-ZIP CAPE CORAL FL

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

TITLE D  
NAME EZELLE, SHIRLEY  
STREET ADDRESS 5301 CORTEZ CT  
CITY-ST-ZIP CAPE CORAL FL

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

TITLE  
NAME  
STREET ADDRESS  
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 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.

CHARLES R. EZELLE

4/25/97

4/25/97

CR2E037 (9/96)