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May 14 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N94000002336 (5)

1. Corporation Name

CHRISTIAN LIBERTY CHURCH, INC.



Principal Place of Business

Mailing Address

5495 CLARCONA-OCOEE ROAD
ORLANDO FL 32801

5495 CLARCONA-OCOEE ROAD
ORLANDO FL 32801

3. Date Incorporated or Qualified

05/12/1994

4. FEI Number

59-3238506

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAMMES, BURKE III
5495 CLARCONA-OCOEE ROAD
ORLANDO FL 32801

81 Name Robert A. Wolfe
82 Street Address (P.O. Box Number is Not Acceptable)
601 Spring Valley Rd
83 Altamonte Springs
84 City Altamonte Springs FL 85 Zip Code 32714

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 Robert A. Wolfe Secretary/Treasurer

4/20/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME ANDERSEN, GARY
STREET ADDRESS 345 E CITRUS ST
CITY-ST-ZIP ALTAMONTE SPRINGS FL

1.1 TITLE D
1.2 NAME Nancy Rowe
1.3 STREET ADDRESS 17 Celia Lane
1.4 CITY-ST-ZIP Orlando, FL 32803

TITLE PD
NAME HAMMES, BURKE III
STREET ADDRESS 338 NORTH LAKE AVE
CITY-ST-ZIP APOPKA FL

2.1 TITLE PD
2.2 NAME JASON HOAG
2.3 STREET ADDRESS 763 Osprey Nest Point
2.4 CITY-ST-ZIP Sanford, FL 32773

TITLE STD
NAME WOLFE, ROBERT
STREET ADDRESS 601 SPRINGVALLEY ROAD
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

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

TITLE VD
NAME GEORGE, HOWARD
STREET ADDRESS 938 LASALLE AVE
CITY-ST-ZIP ORLANDO FL

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

TITLE D
NAME THOMPSON, DIXIE
STREET ADDRESS 382 GROVE COURT
CITY-ST-ZIP WINTER GARDEN FL

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

TITLE D
NAME ANDREWS, ROB
STREET ADDRESS 1320 E. WOODLAND STREET
CITY-ST-ZIP ORLANDO FL

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

14. I 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.

SIGNATURE: Robert A. Wolfe

Robert A. Wolfe

4/27/98

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CR2E037 (10/97)