

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 19 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 # N94000003104 (6)

1. Corporation Name

CAROL CITY CHURCH OF CHRIST, INC.

Principal Place of Business

Mailing Address

16900 N.W. 22ND AVE.  
CAROL CITY FL 33056

16900 N.W. 22ND AVE.  
CAROL CITY FL 33056



3. Date Incorporated or Qualified

06/15/1994

4. FEI Number

NOT APPLICABLE

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

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITE, F.O.  
16900 N.W. 22ND AVE.  
CAROL CITY FL 33056

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME WHITE, F.O.  
STREET ADDRESS 2900 N.W. 185TH STREET  
CITY-ST-ZIP CAROL CITY FL 33056

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

TITLE D  
NAME PHILLIPS, GLENN  
STREET ADDRESS 18060 N.W. 78TH AVE.  
CITY-ST-ZIP MIAMI FL 33015

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

TITLE D  
NAME WHITE, WALTER L.  
STREET ADDRESS 1488 N.W. 101ST ST.  
CITY-ST-ZIP MIAMI FL 33147

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

TITLE D  
NAME WALKER, ARNOLD  
STREET ADDRESS 1470 N.W. 137TH ST.  
CITY-ST-ZIP MIAMI FL 33187

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

TITLE D  
NAME JACKSON, DONALD  
STREET ADDRESS 18535 N.W. 23RD AVE.  
CITY-ST-ZIP MIAMI FL 33056

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

TITLE D  
NAME ROBINSON, WILLIE  
STREET ADDRESS 17531 N.W. 49TH AVE.  
CITY-ST-ZIP MIAMI FL 33055

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:

F.O. White

2/22/98

305624 4874

305624 4874

CR2E037 (10/97)