## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Secretary of State

407-656-4276

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

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CLERMONT COMMUNITY CHURCH, INC.

Principal Place of Business Mailing Address 805 FORESTWOOD DR. 1203 W. HGWY 50 CLERMONT FL 34711-7725 UNIT A CLERMONT FL 34711 3. Date Incorporated or Qualified 3a. Date of Last Report 07/06/1994 05/21/1996 26. Mailing Address 26. P.O. Box 75/ 2. Principal Place of Business 4. FEI Number Applied For 59-3253232 608 Oakland ave Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be OAKLAND OAKLUNG Trust Fund Contribution Added to Fees 23 Country Country This corporation has liability for intangible tax under s. 199.032, OLANGE 29 oranse Florida Statutes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 VAN WAGNER, RICK 82 Street Address (P.O. Box Number is Not Acceptable) 805 FORESTWOOD DR. 83 **CLERMONT FL 34711** City 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) an wagner, Pick 805 FOREST WOOD DR DELETE 1.1 TITLE Change Addition TITLE VAN WAGNER, RICK NAME 1.2 NAME clarmont, Fl 34711 10630 DWIGHTS RD STREET ADDRESS 1.3 STREET ADDRESS **CLERMONT FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE WAN WAGNER, WILLIAM NAME 2.2 NAME 10830 DWIGHTS RD. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP CLERMONT FL 34711 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME VAN WAGNER, JANET 3.2 NAME 10630 DWIGHTS RD. STREET ADDRESS 3.3 STREET ADDRESS **CLERMONT FL 34711** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE **L** Change Addition TITLE 4.1 TITLE YAUN, RADFORD 805 PARKTRAILDR YAUN, RADFORD NAME 4. 2 NAME 3939 COVERLY CT. #5D STREET ADDRESS 4.3 STREET ADDRESS LONGWOOD FL 32779-4689 Cleumont, Fl CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Channe Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIF DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

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 eath; 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 12 or Block or on an attachment with an address.

RADFORD A. Your

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the