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Secretary of State

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NONPROFIT CORPORATION
 ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N94000003806

1. Corporation Name

THEOPOLIS FAMILY CHURCH, INTERNATIONAL, INC.

Principal Place of Business
 920 BEVILLE RD
 DAYTONA BEACH FL 32114

Mailing Address
 920 BEVILLE RD
 DAYTONA BEACH FL 32114

102048-90062-6



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/02/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-3261247

Applied For
 Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip Country

Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHAMPION, ROBERT S
 913 PELICAN BAY DR
 DAYTONA BEACH FL 32119

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAMPION, ROBERT S	1.2 NAME	
STREET ADDRESS	913 PELICAN BAY DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32119	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAMPION, CAROL L	2.2 NAME	
STREET ADDRESS	913 PELICAN BAY DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32119	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLFE, BENNICIE	3.2 NAME	
STREET ADDRESS	RT 10 BOX 595	3.3 STREET ADDRESS	
CITY-ST-ZIP	LIVE OAK FL 32060	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOCKERSMITH, CARY	4.2 NAME	D Champion, Caryll
STREET ADDRESS	610 TURNSTONE TRACE	4.3 STREET ADDRESS	920 Beville Road
CITY-ST-ZIP	NEW SYMERNA BEACH FL 32168	4.4 CITY-ST-ZIP	DAYTONA BEACH, FL 32114
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHAMPION, ERIC	5.2 NAME	
STREET ADDRESS	1432 MOLLIE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE: **ROBERT S CHAMPION** *Robert S. Champion* 1/14/99 904-257-7715
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/98)