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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

## DOCUMENT # N9400006222 (3)

402 11TH AVENUE NORTH ST. PETERBURG FL 33701  2. Periodical Place of Business 2. Periodical Place of Business 2. Suns, Apt. 8, coc. 3. Suns, Apt. 8, coc.	DOWNTOWN CHRISTIAN CENTER, INC.						<b>20</b> 71	
S. T. PETERSBURG FL 33701  2. Principal Place of Business  2. Mailing Addresss  2. Principal Place of Business  2. Amiling Address and 12/20/1894  2. Principal Place of Business  2. Amiling Address and 12/20/1894  2. Principal Place of Business  2. Amiling Address and 12/20/1894  2. Principal Place of Business  3. Edits incorporated of Countries  3. Edits incorporated of Status Desired  3. Edits incorporate of Status Desired  3. Edi	Principal Plac	ce of Business	Mailing Address	Mailing Address		1 100 III 0 10 1810 0 10 10 10 10 10 10 10 10 10 10 10 10	ABIAN BBIAN <b>AB</b> INA BIANG N	1910 (1910 1191 ( <del>1</del> 9)
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Sulte, Appl. et al.  Sulte, Ap						12/20/1994	3a. Date of La 05/01/	1995
Suite, Apol. F. Inc.    Suite, Apol. F. Inc.   2012   2013   2014	<del></del>	Place of Business	— ·			4. FEI Number 50-2955011		Applied For
Score   Columb   Score   Country   Ze   Ze   Country   Ze   Ze   Country   Ze   Ze   Country   Ze   Ze   Ze   Ze   Ze   Ze   Ze   Z		t. #, etc.	<del>-   -   </del>	h		39 2033011		
City & State    City & State   City & City & State   City & City & State   City &	22		<del></del>		5. Certificate of Status Desired	1 1 7		
20 Country   20   20   30   30   50   50   50   50   50   5			<b>—</b>		6. Election Campaign Financing	<u>¢5</u>	<del></del>	
9. Name and Address of Current Registered Agent  ALUISY, GARY N  402 J1TH AVENUE NORTH ST. PETERSBURG FL 33701  83  ALUISY, GARY N  402 J1TH AVENUE NORTH ST. PETERSBURG FL 33701  84  ADV  ST. PETERSBURG FL 33701  85  ST. PETERSBURG FL 33701  85  ST. PETERSBURG FL 33701  86  ST. PETERSBURG FL 33701  87  ST. PETERSBURG FL 33701  87  ST. PETERSBURG FL 33701  88  ST. PETERSBURG FL 33701  89  ST. PETERSBURG FL 34665  ST.				In Country		<del></del>	Added to Fees	
ALUISY, GARY N 402 31TH AVENUE NORTH ST. PETERSBURG FL 33701  11. Pursuant to the provisions of Sections 617 0002 and 617 1008. Florids Statutes, the above named corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently by the corporation submiss this statutement for the purpose of changing was sufficiently and the corporation submiss this statutement for the purpose of changing was sufficiently and submission of changing w	24	25	29	30				s. 199.032,
ALUSY, GARY N  10. STRET ADDRESS  SERIED AVENUE NORTH  11. Previount to the previounce of Sections 617 0500 and 617 1506, Forcide Statutes, the above named corporation submits this statument for the purpose of charaging also galitates, the above named corporation submits this statument for the purpose of charaging also galitates, the above named corporation submits this statument for the purpose of charaging as registered office for registered agent, or both, in the State of Forcia. Such charging wise galitates, the above named corporation submits this statument for the purpose of charaging as registered office formalism with, and accept the obligation of 5,000 for districts.  SIGNATURE  Spales face of private are of registered dages of the Legisland.  SIGNATURE  Spales face of private are of registered dages of the Legisland.  SIGNATURE  Spales face of private are of registered dages of the Legisland.  SIGNATURE  Spales face of private are of registered dages of the Legisland.  SIGNATURE  Spales face of private are of registered dages of the Legisland.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  Spales face of private are of registered dages.  SIGNATURE  Spales face of private are of registered dages.  Spales face of private are of re		9. Name and Address of Curren	t Registered Agent					
### ST. PETERSBURG F1 33701    Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   Salar   St. Petersburg F1 33701   St. Petersburg F1 34085   St. Petersburg F1 340805   St. Petersburg F1 340	ALLIISY	GARY N		8	11 Name			
ST. PETERSBURG FL 33701    Sala				8	Street Add	ress (P.O. Box Number is Not Acceptable	<b>3)</b>	
T1. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above named corporation submits this statement for the purpose of homogenery for 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 em corporation and accept the obligations of, Scotion 617,0503, Florida Statutes.  SIGNATURE  12.				8	3			
T1. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above named corporation submits this statement for the purpose of homogenery for 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 em corporation and accept the obligations of, Scotion 617,0503, Florida Statutes.  SIGNATURE  12.					4 6"			
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SONATURE  Sopulative, fused or provided rame of imposited agent and large colors  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE  ALUISY, GARY N  STORE TADRESS SIREET ADDRESS CITY-S1-2P  INELLAS PARK FL 34665  CITY-S1-2P  THE  BALDWIN, MOSES  STORE ADDRESS CITY-S1-2P  THE  GARDNER, MIKE  STORE GARDNER, M	or registe familiar w	to the provisions of Sections 617.0502 ered agent, or both, in the State of Florio vith, and accept the obligations of, Section	and 617.1508, Florida Statute a. Such change was authorizi on 617.0503, Florida Statutes	es, the above ed by the co	named corpo poration's boa	oration submits this statement for the purp ard of directors. I hereby accept the appoi	ose of changing its ntment as registers	registered office ed agent. I am
12. OFFICERS AND DIRECTORS  13. ADDITIONS'C IANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  ALUISY, GARY N  5555 62ND AVENUE NORTH  PINELLAS PARK FL 34685  14. CITY-ST-2P  TITLE  BALDWIN, MOSES  STEET ADDRESS  TREET A								
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THE WILLIAMS, TED  STREET ADDRESS  CITY-ST-ZIP  PINELLAS PARK FL 34665  14. I do hereby certify that the information indicated on this aground for supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under appears in Block 12 or Block 13 if chapted or a partitachment with an address.  SIGNATURE:  On Male  STREET ADDRESS 64 CITY-ST-ZIP  61 TITLE 61 TITLE 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 TITLE 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 TITLE 65 TITLE 65 TITLE 66 TITLE 6	STREET ADDRESS				1 ADDRESS	****61,25		
WILLIAMS, TED  STREET ADDRESS  CITY-ST-ZIP  PINELLAS PARK FL 34665  14. I do hereby certify that the information indicated on this amount food of supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under appears in Block 12 or Block 13 if chapted or an attachment with an address.	CITY-ST-ZIP				ST-ZIP			
STREET ADDRESS  5555 62ND AVENUE NORTH PINELLAS PARK FL 34665  14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further carbit, that I am an officer or director of the proportion of 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 chapter or an address.	i	<u> </u>	☐ DELETE				☐ Change	☐ Addition
PINELLAS PARK FL 34665  14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K), Florida Statutes I further certify that the information indicated on this agricultarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K), Florida Statutes I further cath; that I am an officer or director of the copyright of 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 chapter or any attachment with an address.	STREET ADDRESS	5555 62ND AVENUE NORTH			I ADDRESS			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this agrue report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the original property of 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 chapter or in an attachment with an address.	CITY - ST- ZIP	PINELLAS PARK FL 34665		5 4 6 7 11				İ
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