FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State ? DIVISION OF CORPORATIONS

1996

N95000003112 (8) DOCUMENT #

CHRISTIAN FAMILY FELLOWSHIP OF LEE COUNTY INCORP ORATED

Principal Place of Business 12201 SHOREVIEW DRIVE MATLACHA FL 33909

Mailing Address

12201 SHOREVIEW DRIVE MATLACHA FL 33909

APPROVED AND

96 FEB 28 PH 12: 56

SECRETARY OF STATE



miniploist is good					
					3. Date Incorporated or Qualified 06/28/1995 Support
Principal Place of Business 2a. Mailing Addr			SS		4. FEI Number Applied For
21					65-0605790 Not Applicable
		Suite, Apt. #, etc	Suite, Apt. #, etc.		\$9.75 Additional
22		27	1		5. Certificate of Status Desired Fee Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Co.	untry	This corporation has liability for intangible tax under s. 199.032,
24	25	29	30		Florida Statutes 🔲 Yes 📈 No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
	=			81 Name	
HAGOPIAN, R. WAYNE				82 Street /	Address (P.O. Box Number is Not Acceptable)
"12201 Shoreview dr.					
/MATLACHA FL 33909				83	
/				84 City	85 Zip Code
/					FLI'I
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, it 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. INOTE: Registered Agent signature required when reinstating! DATE					
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 (ITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 P Change BAddition TOHN BARBOUR "T" 1312 SE.24 AVE CAPE CORAL, FL 33990
NAME			1.2 N	AME	JOHN BARBOUR "T'
STREET ADDRESS			1.3 \$	TREET ADDRESS	1312 SE, 24 AVE
CITY-ST-ZIP				ity-st-zip	CAPE CORAL, FL 33990
TITLE		DELETE	2.1 T		T Change ☑ Addition ○
NAME			2.2 N		R. WAYNE HAGOPIAN "T
STREET ADDRESS			235	TREET ADDRESS	12201 SHOKEVIEW DRIVE
CITY-ST-ZIP				CHTY-ST-ZIP	MATLACHA FL 33909
TITLE		DELETE	3 Ti		S Change 🗖 Addition
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STREET ADDRESS			3 S	TREET ADDRESS	BEVERLY VICKERS T
CITY-ST-ZIP				CITY-ST-ZIP	CAPE CORAL, FL 33990
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CITY-ST-ZIP			4 1	ITY-ST-ZIP	
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STREET ADDRESS				TREET ADDRESS	(Z) \a\p
1					$\mathcal{Y}_{\mathcal{O}}$
CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 7/ \ 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, if 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 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 13 if changed or on an attachment with an address.

941)283-9304