


FILE NOW: FILING FEE IS \$61.25

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Jul 01 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N95000004780 (1)**  
1. Corporation Name  
**CORNERSTONE MISSIONARY CHURCH INC.**



Principal Place of Business <b>826 15TH ST. WEST BRADENTON FL 34205</b>	Mailing Address <b>826 15TH ST. WEST BRADENTON FL 34205-6620</b>
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3. Date Incorporated or Qualified <b>10/05/1995</b>	3a. Date of Last Report <b>03/04/1996</b>
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2. Principal Place of Business 21 <b>1414 17th Ave W</b> Suite, Apt. #, etc. 22 <b>Bradenton</b> City & State 23 <b>FL 34205</b> Zip Country	2a. Mailing Address 26 <b>1414 17th Ave W</b> Suite, Apt. #, etc. 27 City & State 28 <b>Bradenton, FL</b> Zip Country 29 <b>34205</b> 30 <b>MANATEE</b>
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4. FEI Number <b>65-0625654</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**ADAMS, REV. TROY**  
**2860 51ST ST.**  
**SARASOTA FL 34234**

10. Name and Address of New Registered Agent  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	NAME <b>ADAMS, REV. TROY - D</b>	1.1 TITLE <b>D</b>	NAME <b>ADAMS, TROY. PASTOR - D</b>
STREET ADDRESS <b>2860 51ST ST.</b>	CITY-ST-ZIP <b>SARASOTA FL</b>	1.2 NAME	1.3 STREET ADDRESS <b>2860-51ST STREET</b>
TITLE <b>VD</b>	NAME <b>PRUNA, REV. ROBERT</b>	1.4 CITY-ST-ZIP <b>SARASOTA, FLA. 34234</b>	2.1 TITLE <b>D</b>
STREET ADDRESS <b>5205 DAVID AVE.</b>	CITY-ST-ZIP <b>SARASOTA FL</b>	2.2 NAME <b>VERNON R. BRANSON - D</b>	2.3 STREET ADDRESS <b>2406-16th St Cr. W.</b>
TITLE <b>STD</b>	NAME <b>CURRY, MARY LOUISE</b>	2.4 CITY-ST-ZIP <b>BRADENTON, FLA 34205</b>	3.1 TITLE <b>D.</b>
STREET ADDRESS <b>5205 DAVID AVE.</b>	CITY-ST-ZIP <b>SARASOTA FL</b>	3.2 NAME <b>Melissa Adams - D</b>	3.3 STREET ADDRESS <b>2860 51st St</b>
TITLE	NAME	3.4 CITY-ST-ZIP <b>SARASOTA, FL 34234</b>	4.1 TITLE
STREET ADDRESS	CITY-ST-ZIP	4.2 NAME	4.2 NAME
TITLE	NAME	4.3 STREET ADDRESS	4.3 STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP	4.4 CITY-ST-ZIP	5.1 TITLE
TITLE	NAME	5.2 NAME	5.2 NAME
STREET ADDRESS	CITY-ST-ZIP	5.3 STREET ADDRESS	5.3 STREET ADDRESS
TITLE	NAME	5.4 CITY-ST-ZIP	6.1 TITLE
STREET ADDRESS	CITY-ST-ZIP	6.2 NAME	6.2 NAME
TITLE	NAME	6.3 STREET ADDRESS	6.3 STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP	6.4 CITY-ST-ZIP	6.4 CITY-ST-ZIP

4.1 TITLE	Change	Addition
4.2 NAME	Change	Addition
4.3 STREET ADDRESS	Change	Addition
4.4 CITY-ST-ZIP	Change	Addition
5.1 TITLE	Change	Addition
5.2 NAME	Change	Addition
5.3 STREET ADDRESS	Change	Addition
5.4 CITY-ST-ZIP	Change	Addition
6.1 TITLE	Change	Addition
6.2 NAME	Change	Addition
6.3 STREET ADDRESS	Change	Addition
6.4 CITY-ST-ZIP	Change	Addition

14. I do 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.

CR2E037 (9/96)