FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

N96000001470 (1)

CHURCH OF CHRIST OF PLANT CITY, INC.

Principal Place of Business Mailing Address						T HERITARI DIR IDIIN DIIII ODIII ODIII ODIII ODIII ODIII ODIII DIII DIII DIII DIII ODIII INDII ODIII INDII INDII
936 NORTH WILDER ROAD PLANT CITY FL 33566		936 NORTH WILDER ROAD PLANT CITY FL 33566-9031				·
						3. Date Incorporated or Qualified 03/15/1996 3s. Date of Last Report
	lace of Business	2a. Mailing Address	ailing Address			4. FEI Number Applied For Sq - 2715062 Not Applied be
21 Suite, Apt.	# etc	Suite, Apt #, etc.				
22	# ₁ 010.	27	¬ ' '			5. Certificate of Status Desired See Required
City & State	3	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip .			⊢	untry		8. This corporation has liability for intangible tax under s. 199.032,
24	25 9. Name and Address of Curren	29	30	μ.		Florida Statutes Yes WNo 10. Name and Address of New Registered Agent
	S. Halle and Address of Collect	t nogistered Agent		81	Name	IV. Hame and Address of New Registered Agent
SMITH	POPUE					
SMITH, ERCELLE 936 NORTH WILDER ROAD				82	Street A	ddress (P.O. Box Number is Not Acceptable)
PLANT C						
				84	City	85 Zip Code
44 5	(0.00	0 - 1017 1000 51: 11 0		Ш	•	FL ·
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 it applicable (NOTE Registered Agent signs					nt signature re	equired whon reinstating) DATE
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 1	IILE		Change Addition
NAME	MOBLEY, ELWOOD		1.2 NAME			
STREET ADDRESS	103 A NORTH DAVIS				ADDRESS	
CITY-ST-ZIP TITLE	PLANT CITY FL 33566	DELETE		1.4 C(TY - ST - Z(P 2.1 T)TLE		Change Addition
NAME	AND LEGACITE		2.2 N			Change Radinon
STREET ADDRESS	2305 CLEMMONS ROAD		i i		ADDRESS	
CITY-ST-ZIP PLANT CITY FL 33566				DITY-S		
TITLE	D	☐ DELETE				Change Addition
NAME	WILLIAMSON, WILLIE		3.2 N	AME		• • • •
STREET ADDRESS	1309 WINDJAMMER PLACE		3.3 S	TREET	ADDRESS	T.
CITY-ST-ZIP	VALRICO FL 33594	DOLETE		CITY - S	I - ZIP	
TITLE	D WOMACK, WILLIAM V	☐ DELETE	4.1 Ti 4. 2 h			☐ Change ☐ Addition
NAME Street Address	5043 NINTH STREET				ADDRESS	
CITY-ST-ZIP	ZEPHRYHILLS FL 33540-5178	.		HTY-SI		
TITLE		DELETE			. 4.11	☐ Change ☐ Addition
NAME			5.2 N	IAME		
STREET ADDRESS			5.3 S	TREET	ADDRESS	
CITY-ST-ZIP				ITY-S	T-ZIP	
TITLE		☐ DELETE				☐ Change ☐ Addition
NAME			6.2 N			
STREET ADDRESS			6.3 S	TREET	ADDRESS	·

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 trusted 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.

CICNIATUDE.

willen Smith

1-11-611