


FILE NOW: FILING FEE IS \$61.25

FILED
Sep 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001848 (8)

1. Corporation Name

CLERGY & EDUCATORS NETWORK, INC.



Principal Place of Business	Mailing Address
9242 120TH AVE. N. LARGO FL 34643	9242 120TH AVE. N. LARGO FL 33773-4328

3. Date Incorporated or Qualified 04/01/1996	3a. Date of Last Report
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2. Principal Place of Business	2a. Mailing Address
21 9242 120TH Ave N	26 PO Box 21485
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Largo FL	28 Tampa FL
Zip	Zip
24 33773	29 33622
Country	Country
25 Pinellas	30 Hillsborough

4. FEI Number 59-3370606	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 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	
GREEN, REVEREND H 9242 120TH AVE. N. LARGO FL 34643	

10. Name and Address of New Registered Agent	
81 Name Rev. Henry Green	82 Street Address (P.O. Box Number is Not Acceptable) 9242 120TH Ave N
83	84 City Largo
85 Zip Code 33773	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 *Rev. H. Green* DATE *9/15/97*

12. OFFICERS AND DIRECTORS		
TITLE	DP	<input type="checkbox"/> DELETE
NAME	GREEN, REVEREND H	
STREET ADDRESS	9242 120TH AVE.	
CITY-ST-ZIP	N. LARGO FL 34643	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	COOK, JANET	
STREET ADDRESS	201 PLANTATION CLUB DR., #702	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	DAVIES, DAN	
STREET ADDRESS	535 DELANNOY AVE.	
CITY-ST-ZIP	COCOA FL 32922	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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.

SIGNATURE *Rev. H. Green* DATE *9/15/97*

CR2E037 (9/96)