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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

N96000003407 (1)

CHRISTIAN FAMILY CHURCH. INC.

Principal Place of Business  14920 TRITON TERRACE HUDSON FL 34667  3. Date Incorporated or Qualified O6/26/1996  2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2f Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State  Zip Country  Alling Address  4. FEI Number Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Trust Fund Contribution Added to Fees Trust Fund Contribution Added to Fees Added to Fees Added to Fees										
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2. Pincipal Flace of Business   2a. Mailing Address   25   25   30   30   50   30   \$8.76 Address   \$9.876 Age   \$0.00   \$8.76 Address   \$9.876 Age   \$0.00   \$8.76 Address   \$9.76 Age   \$0.00   \$8.76 Address   \$9.76 Addr										
Surise, Apt. 4, oic    Surise, Apt. 4, oic			÷				3. Date Incorporated or Qualit 06/26/1996	lied <b>3a.</b> Da	ite of Last F	Report
Suite, Apt. 4, ofc.    State   Country   City & State   City & Ci	2. Principal Place of Busine	988 2	a. Mailing Address				i i	• • • • • • • • • • • • • • • • • • • •	A	pplied For
City & State  Ci	21	26		57			59-3391620			
City & State   City			n ''' '				5. Certificate of Status Desired	d 🙀		
Trust Fund Contribution   Active to Feee   Active to Feed   Active to Fe							6 Floation Campaign Figuresia			
Zip   Country   Zip   Country   St. This corporation has liability for intengible tax under s. 199.032, Prioride Statutes   Normal and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Address of New Registered Agent   10. Name and Ad	23	21	n					~ —		
9. Name and Address of Current Registered Agent  PERKINS, NANCY M 14920 TRITON TERRACE HUDSON FL 34667  11. Pursuant to the provisions of Sections €17/0502 and €17/1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, are both, in the State of Florida, Such change was authorized by the corporation's board of director's libered pagent, are both, in the State of Florida, Such change was authorized by the corporation's board of director's libered appointment as registered agent, are both, in the State of Florida, Such change was authorized by the corporation's board of director's libered pagent and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  11. Pursuant to the purposition of Sections €17/0502 and €17/1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, are 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, are both and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDIRONSCHANGES TO OFFICERS AND DIRECTORS IN 12: 12 NAME  13. SIRECT ADDRESS  SIGNATURE  PERKINS, MAURICE L  12. ADDIRONSCHANGES TO OFFICERS AND DIRECTORS IN 12: 12 NAME  14920 TRITON TERRACE  HUDSON FL 34667  1016  1016  1017  1017  1017  1018  1019  1			_+	Coun	itry		8. This corporation has liability	y for intangible		
PERKINS, NANCY M 14920 TRTON TERRACE HUDSON FL 34867  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 agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the observations board of directors. I hereby accept the appointment as registered states.  SIGNATURE  SIGNATURE  PO OFFICERS AND DIRECTORS  13. ADDIRECTORS (12. ADDIRECTORS (13. ADDIRECTORS IN 12.) TITLE  PO DEMIK, DONALD  DEMIK, DONALD  DEMIK, DONALD  DEMIK, DONALD  DEMIK, DONALD  STRET ADDRESS  STD  STD  DELETE  41 TITLE  STD  Change  Addition  A	24	25	<u> </u>	30						
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1. Pursuant to the provisions of Sections 617 0502 and 617 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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, 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, 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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the objective down in the provided agent, and accept the objective down in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the objective down in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the objective down in the purpose of changing its registered agent agent and accept the objective down in the purpose of change in the purpose of change in the purpose of change of directors. I hereby accept the objective down in the purpose of change of directors. I hereby accept the objective down in the purpose of change of directors. I hereby accept the objective down in the purpose of the purpos	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ļ.	PA C	Sits 2		·····	es Zio	Code
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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.

MAURICE L. PERKINS

Date

**FILED** 

Feb 04 1997 8:00am

Secretary of State

Daytime Phone # 0068265