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May 16 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000004299 (1)

1. Corporation Name

CHRISTIAN MEDIATION & RECONCILIATION GROUP, INC.



Principal Place of Business

Mailing Address

7170 S.W. 22ND STREET
DAVE FL 33317

7170 S.W. 22ND STREET
DAVE FL 33317-7122

3. Date Incorporated or Qualified
08/15/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 117 LAKE EMERALD DR

26 Suite, Apt. #, etc.

22 # 407

27 Suite, Apt. #, etc.

23 Ft. Lauderdale, FL

28 City & State

24 33309

25 Country

Broward

29 Zip

30 Country

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NORRIS, THOMAS W.
7170 S.W. 22ND STREET
DAVE FL 33317

81 Name GERALD P. DePace

82 Street Address (P.O. Box Number is Not Acceptable)
117 LAKE EMERALD DRIVE

83 # 407

84 City Ft. Lauderdale

FL

85 Zip Code 33309

11. Pursuant to the provisions of Sections 617.0502 and 617.1503, 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, if applicable

(NOTE: Registered Agent signature required when reinstating)

5/3/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME NORRIS, THOMAS W.
STREET ADDRESS 7170 S.W. 22ND STREET
CITY - ST - ZIP DAVE FL 33317

1.1 TITLE ☐ LINDY OLIVEANN ☐ Addition
1.2 NAME 7170 SW 22 ST
1.3 STREET ADDRESS 01010 FL 33317
1.4 CITY - ST - ZIP

TITLE D ☒ DELETE
NAME LANDY OLIVEANN ESQ.
STREET ADDRESS 7170 S.W. 22ND STREET
CITY - ST - ZIP DAVE FL 33317

2.1 TITLE D CHARLES D. TUCKER ☒ Change ☐ Addition
2.2 NAME 117 LAKE EMERALD DR. #410
2.3 STREET ADDRESS FT. LAUDERDALE, FL 33309
2.4 CITY - ST - ZIP

TITLE D ☐ DELETE
NAME DEPACE, GERALD P ESQ.
STREET ADDRESS 117 LAKE EMERALD DR., #407
CITY - ST - ZIP FORT LAUDERDALE FL 33309

3.1 TITLE D THE REV. DR. FREDICK ZIEMS ☒ Change ☐ Addition
3.2 NAME 3800 NE 23RD AVENUE
3.3 STREET ADDRESS LIGHTHOUSE POINT, FL 33064
3.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME 900002195519
6.3 STREET ADDRESS -05/30/97--01004--007
6.4 CITY - ST - ZIP ***61.25

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:

GERALD P. DEPACE

Date

Deputy Phone # 0036821

CR2E037 (9/96)

4/11/97