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NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

250 CORY AVE NE

PALM BAY FL 32907



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name

N96000004705 (7)

Mailing Address

250 CORY AVE NE

PALM BAY FL 32907

CHRISTIAN MISSION ADONALING.

59-3396391 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional Certificate of Status Desired Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes Yes 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROMERO, FRANCISCO **B2** Street Address (P.O. Box Number is Not Acceptable) 250 CORY AVE NE 83 PALM BAY FL 32907 City 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE 1.1 TITLE Change Addition TITLE **PASTOR FRANCISCO ROMERO** 1.2 NAME NAME 250 CORY AVE STREET ADDRESS 1.3 STREET ADDRESS PALM BAY FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE ROMERO, WILLIAM NAME 2.2 NAME 1063 HOOPER AVE 2.3 STREET ADDRESS STREET ADDRESS PALM BAY FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 3.1 TILLE Change Addition TITLE NAME PAGAN, RAFAEL 32 NMF 1070 HOOPER AVE NE STREET ADDRESS EET ADDRESS PALM BAY FL CITY-ST-ZIP Y-ST-ZIP DELETE TITLE 4.1 Change Addition NAME ROMERO, AIDA 1083 HOOPER AVE STREET ADORESS I ADDRESS <u>Pålm bay fl</u> ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE ROMERO, JUAN NAME 1063 HOOPER AVE STREET ADDRESS 5.3 EET ADDRESS CITY-ST-ZIP PALM BAY FL Y-ST-ZIP DELETE Addition TITLE 6.11 Change GARCIA, ADA E NAME 1792 SANDS RD STREET ADDRESS 6.3 STREET ADDRESS PALM BAY FL CITY-ST-ZIP 6.4 CiTY-ST-ZIP 14. I 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:

2-01-78

Applied For

Not Applicable

FILED

Feb 09 1998 8:00am

Secretary of State

3. Date Incorporated or Qualified

<u>09/09/1996</u>

4. FEI Number