

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90197 043 \*\*\*\*61.25

DOCUMENT # N96000004706

1. Corporation Name

COMMUNITY BIBLE CHAPEL, INC. OF POLK COUNTY

Principal Place of Business

29 OAKWOOD ROAD  
WINTER HAVEN FL 33880

Mailing Address

29 OAKWOOD ROAD  
WINTER HAVEN FL 33880



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

09/09/1996

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

FRODGE, FRANCES  
29 OAKWOOD ROAD  
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 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)

DATE

12.

OFFICERS AND DIRECTORS

TITLE SD ☐ DELETE

NAME FRODGE, FRANCES  
STREET ADDRESS 29 OAKWOOD ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE D ☐ DELETE

NAME STICKLEN, MARY  
STREET ADDRESS 29 OAKWOOD ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE D ☐ DELETE

NAME DISCHER, EDWARD  
STREET ADDRESS 29 OAKWOOD ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE D ☐ DELETE

NAME DISCHER, ANNA  
STREET ADDRESS 29 OAKWOOD ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE D ☒ DELETE

NAME MILLER, RACHEL  
STREET ADDRESS 29 OAKWOOD ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE P ☐ DELETE

NAME FRODGE, DAN  
STREET ADDRESS 29 OAKWOOD ROAD  
CITY-ST-ZIP WINTER HAVEN FL 33880

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
FRANCES A. FRODGE 2/5/99 (941) 967-2919

Date

Daytime Phone #

CR2E037 (11/98)