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May 08 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 # N96000005358 (4)

1. Corporation Name

CHURCH AT THE ISLAND, INC.



Principal Place of Business

Mailing Address

3230 AVOCET LANE
P.O. BOX 1623
ORANGE PARK FL 32067

3230 AVOCET LANE
P.O. BOX 1623
ORANGE PARK FL 32067-1623

3. Date Incorporated or Qualified
10/18/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip 32065

Country

28 Orange Park, FL
29 Zip 32067

Country

4. FEI Number

59-3403951

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

SIKES, CONNIE
JAMES W. HORNE AND ASSOCIATES
575 WELLS ROAD
ORANGE PARK FL 32073

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME HOOKER, ART JR
STREET ADDRESS 3230 AVOCET LANE
CITY-ST-ZIP ORANGE PARK FL 32065

1.1 TITLE D.P. ☒ Change ☐ Addition
1.2 NAME Hooker, Art Jr.
1.3 STREET ADDRESS 3230 Avocet Lane
1.4 CITY-ST-ZIP Orange Park, FL 32065

TITLE D ☐ DELETE
NAME HOOKER, KIMBERLY
STREET ADDRESS 3230 AVOCET LANE
CITY-ST-ZIP ORANGE PARK FL 32065

2.1 TITLE D.S. ☒ Change ☐ Addition
2.2 NAME Hooker, Kimberly
2.3 STREET ADDRESS 3230 Avocet Lane
2.4 CITY-ST-ZIP Orange Park, FL 32065

TITLE D ☐ DELETE
NAME SMITH, JAMES B II
STREET ADDRESS 615 HAWKES ISLAND DRIVE
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

3.1 TITLE D.T. ☒ Change ☐ Addition
3.2 NAME Smith, James B II
3.3 STREET ADDRESS 615 Hawkes Island Drive
3.4 CITY-ST-ZIP Green Cove Springs, FL 32043

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME Smith, Tobitha
4.3 STREET ADDRESS 615 Hawkes Island Drive
4.4 CITY-ST-ZIP Green Cove Springs, FL 32043

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
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:

Art Hooker, Jr. ART HOOKER, JR.

4/25/97

904-242-1976

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 00000000

CR2E037 (9/96)