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Jan 24 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 # N96000005618 (1)

1. Corporation Name

EVANGEL CHRISTIAN CENTER, INC.



Principal Place of Business

Mailing Address

2102 SOUTH RIDGEWOOD AVE.
SUITE 8
EDGEWATER FL 32141

2102 SOUTH RIDGEWOOD AVE.
SUITE 8
EDGEWATER FL 32141-4225

3. Date Incorporated or Qualified
11/04/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

P.O. Box 6077

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

TITUSVILLE FL

Zip

Country

Zip

Country

24

25

29

32782-6077

30

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAZE, PAUL MICHAEL
1507 VISTA TERRACE
TITUSVILLE FL 32780

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 MAZE, PAUL M
STREET ADDRESS 1507 VISTA TERRACE
CITY - ST - ZIP TITUSVILLE FL 32780

1.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME MAZE, BRENDA J
STREET ADDRESS 1507 VISTA TERRACE
CITY - ST - ZIP TITUSVILLE FL 32780

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME WILLINGHURST, RICHARD D
STREET ADDRESS 915 CAROLINA CIR
CITY - ST - ZIP TITUSVILLE FL 32780

3.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME WILLINGHURST, REGINA A
STREET ADDRESS 915 CAROLINA CIR
CITY - ST - ZIP TITUSVILLE FL 32780

4.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME SNYDER, THOMAS E
STREET ADDRESS 2295 GEORGIA AVE.
CITY - ST - ZIP TITUSVILLE FL 32796

5.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME SNYDER, LYDIA MARIE E
STREET ADDRESS 2295 GEORGIA AVE.
CITY - ST - ZIP TITUSVILLE FL 32796

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME SNYDER, LYDIA MARIE
6.3 STREET ADDRESS 2295 GEORGIA AVE.
6.4 CITY - ST - ZIP TITUSVILLE FL 32796

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:

Lydia Marie Snyder, DIRECTOR

1-6-97

407-268-3465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 8002933

CR2E037 (9/96)