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Feb 19, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # N96000005696

1. Corporation Name
WEST SIDE CHRISTIAN CENTER, INC.

Principal Place of Business
**720 S 1ST STREET
 ORANGE CITY FL 32763**

Mailing Address
**720 S 1ST STREET
 ORANGE CITY FL 32763**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	425 S. Volusia Ave	26		11/06/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22	Suite E.	27		59-3419395	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23	ORANGE CITY, FL	28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24	32763	29		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SEVER, HERBERT E 720 S 1ST STREET ORANGE CITY FL 32763				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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT <input type="checkbox"/> DELETE	1.1 TITLE	Trustee <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HERBERT E SEVER	1.2 NAME	JAMES M. MARTELLO
STREET ADDRESS	720 S 1ST ST	1.3 STREET ADDRESS	3302 GLENSHARE WAY
CITY-ST-ZIP	ORANGE CITY FL 32763-6402	1.4 CITY-ST-ZIP	ORMOND BEACH, FL 32174
TITLE	VT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN D SIKES	2.2 NAME	
STREET ADDRESS	1720 W ROBERT ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE CITY FL 32763	2.4 CITY-ST-ZIP	
TITLE	ST <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN M SEVER	3.2 NAME	
STREET ADDRESS	603 ANDERSON DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL 32725	3.4 CITY-ST-ZIP	
TITLE	TTR <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLINS, ALAN G	4.2 NAME	
STREET ADDRESS	225 E. ROBERT ST.	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORNAGE CITY FL 32763	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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, with all other like empowered.

SIGNATURE: **HERBERT E SEVER** **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 6, 1999, 904 775-4520
Date Daytime Phone #

W1232V

CR2E037 (1/198)