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Apr 21 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000002305
1. Corporation Name

RESURRECTION HOUSING OF CENTRAL FLORIDA, INC.

Principal Place of Business LOWNDES, DROSDICK, DOSTER, KANTOR & REED 215 N EOLA DRIVE ORLANDO FL 32802	Mailing Address LOWNDES, DROSDICK, DOSTER, KANTOR & REED 215 N EOLA DRIVE ORLANDO FL 32802
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3. Date Incorporated or Qualified 04/23/1997	3a. Date of Last Report None
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2. Principal Place of Business 21 DEAN MEAD Suite, Apt. #, etc. 22 800 N MAGNOLIA AVE, #1500 City & State 23 ORLANDO FL 32803 Zip Country 24 32803 25	2a. Mailing Address 26 DEAN MEAD Suite, Apt. #, etc. 27 800 N MAGNOLIA AVE, #1500 City & State 28 ORLANDO FL 32803 Zip Country 29 32803 30
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4. FEI Number 59-3496844	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	

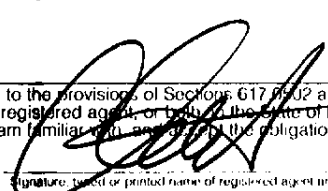
9. Name and Address of Current Registered Agent

LOWNDES, AMY S. ESQ.
215 N EOLA DRIVE
ORLANDO FL 32802

10. Name and Address of New Registered Agent

81 Name	EGERTON, CHARLES H.
82 Street Address (P.O. Box Number is Not Acceptable)	800 N MAGNOLIA AVE, SUITE 1500
83	000002495580
84 City	ORLANDO FL 32803

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  Charles H. Egerton (NOTE: Registered Agent signature required when translating) DATE 4/17/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	D/P ☐ Change ☒ Addition
NAME		1.2 NAME	RABY, EDITH
STREET ADDRESS		1.3 STREET ADDRESS	1007 BRADFORD DR
CITY-ST-ZIP		1.4 CITY-ST-ZIP	WINTER PARK FL 32792
TITLE	☐ DELETE	2.1 TITLE	D/V ☐ Change ☒ Addition
NAME		2.2 NAME	EGERTON, CHARLES H.
STREET ADDRESS		2.3 STREET ADDRESS	627 CHEROKEE CIR
CITY-ST-ZIP		2.4 CITY-ST-ZIP	ORLANDO FL 32801
TITLE	☐ DELETE	3.1 TITLE	D/S ☐ Change ☒ Addition
NAME		3.2 NAME	CARY, SARA E.
STREET ADDRESS		3.3 STREET ADDRESS	1001 POINSETTIA AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	ORLANDO FL 32804
TITLE	☐ DELETE	4.1 TITLE	D/T ☐ Change ☒ Addition
NAME		4.2 NAME	HATCHER, MARION F.
STREET ADDRESS		4.3 STREET ADDRESS	908 ALBA DR
CITY-ST-ZIP		4.4 CITY-ST-ZIP	ORLANDO FL 32804
TITLE	☐ DELETE	5.1 TITLE	D ☐ Change ☒ Addition
NAME		5.2 NAME	DASHER, REV. ART
STREET ADDRESS		5.3 STREET ADDRESS	6316 MATCHETT RD
CITY-ST-ZIP		5.4 CITY-ST-ZIP	PINECASTLE FL 32809
TITLE	☐ DELETE	6.1 TITLE	D ☐ Change ☒ Addition
NAME		6.2 NAME	GALBRAITH, PENNY
STREET ADDRESS		6.3 STREET ADDRESS	51 OAKLEIGH LN
CITY-ST-ZIP		6.4 CITY-ST-ZIP	MAITLAND FL 32751

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles H. Egerton, Vice President

Date

Daytime Phone #

CR2E037 (9/96)

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ATTACHMENT TO
1998 NONPROFIT CORPORATION ANNUAL REPORT
FOR
RESURRECTION HOUSING OF CENTRAL FLORIDA, INC.
DOCUMENT # N97000002305

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

7.1 Title	D	Addition
7.2 Name	Miller, Carl	
7.3 Street Address	720 N Denning Ave	
7.4 City-St-ZIP	Winter Park FL 32789	

8.1 Title	D	Addition
8.2 Name	Oliver, Ricardo	
8.3 Street Address	1730A Americana Blvd	
8.4 City-St-ZIP	Orlando FL 32839	

9.1 Title	D	Addition
9.2 Name	Zink, William P.	
9.3 Street Address	909 Cordova Dr	
9.4 City-St-ZIP	Orlando FL 32804	