NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90078 014 \*\*\*\*61.25

DOCUMENT # N9700003248

FAMILY CHURCH OF CHRIST INC.

Principal Place of Business							
490 NE 177TH ST.							
NORTH MIAMI REACH FL 33162							

Mailing Address

490 NE 177TH ST.

NORTH MEANI BEACH FL 33162

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25   28   29   30   30   Trust Fund Confidencing   \$5.00 May 8e   Added to Fees	<b>–</b>	9.	<u> </u>	ita.				5. Certificate of Status Des	ired			
9. Name and Address of Current Registered Agent  LETTERBOOM, ALBERT A 490 NE 177TH ST. NORTH MAMI BEACH FL 33162  11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of charging lis registered agent. In an advantage of provide such change was authorized by the corporation submits this statement for the purpose of charging lis registered agent. In an advantage of provide such change was authorized by the corporation submits this statement for the purpose of charging lis registered agent. In an advantage of provide such change was authorized by the corporation submits this statement for the purpose of charging lis registered agent. In an advantage of provide such change was authorized by the corporation submits this statement for the purpose of charging lis registered agent. In a final ratio, and accept the obligation of Section 517,0503, Florids Statutes. The corporation submits this statement for the purpose of charging lis registered agent. In a final ratio, and accept the obligation of Section 517,0503, Florids Statutes. The corporation submits this statement for the purpose of charging lis registered directors, I hereby accept the appointment as registered agent. In a final ratio of the purpose of charging lis registered directors, I hereby accept the appointment as registered addition.  SIGNATURE  DO			$\vdash$		Country	,						
LETTERBOOM, ALBERT A  490 NE 177TH ST. NORTH MAMI BEACH FL 33162  B4 Cky  FL 83 Zip Code  B4 Cky  FL 85 Zip Code  B4 Cky  FL 85 Zip Code  B4 Cky  FL 85 Zip Code  B5 Zip Code  B6 Cky  FL 85 Zip Code  B6 Cky  FL 85 Zip Code  B7 Cky  B7 Cky  B8 Zip Code	24											1
LETTERBOOM, ALBERT A  490 NE 177TH ST.  NORTH MIAMI BEACH FL 33162  11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statisment for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, I hereby accept the experiment as registered agent. In arribar with, and accept the obligations of, Section 617.0509, Principal Statutes, the above-named corporation submits this statisment for the purpose of changing its registered agent. In arribary accept the appointment as registered of directors, I hereby accept the appointment as registered of the corporation's board of directors, I hereby accept the appointment as registered statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  PD  OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  12. DEFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  12. TITLE  DETIRE BOOM, ALBERT A  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  PD  Change Addition  LETTERBOOM, ALBERT A  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  PD  Change Addition  TITLE  VD  NAMAR BEACH FL 33162  DELETE  14. STREET ALORESS  N. MIAMI BEACH FL 33162  DELETE  33. TITLE  Change Addition  TO  DELETE  33. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS IN		9. Name and Address of Current	Registered Ager	12	R1	Name		· · · · · · · · · · · · · · · · · · ·	11011 10091010101			1
### Addition  ##					١٠,							1
NORTH MAMI BEACH FL 33162  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids 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 Florids, Such change was authorized by the corporation's board of directors, I hereby accept the applications of Section 617,0503, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors, I hereby accept the application and such applications, I hereby accept the application of the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors, I hereby accept the application and such applications, I hereby accept the application of the purpose of changing its registered and such applications, I hereby accept the application of the purpose of changing its registered and such applications, I hereby accept the application of the purpose of change in registered and such applications, I hereby accept the application of the purpose of changing its registered and such applications, I hereby accept the application of the purpose of change in registered and such applications, I hereby accept the application of the purpose of changing its registered and such applications, I hereby accept the application of the purpose of directors, I hereby accept the application of the corporation authorized by the corporation of directors, I hereby accept the application of the purpose of changing in registered and such applications, I hereby accept the application of the purpose of changing in registered and such applications, I hereby accept the corporation of directors, I hereby accept the application of the purpose of changing in registered and such applications, I have a purpose of the purpose of the purpose of the purpose of the purpose	LETTERBO	OOM, ALBERT A			B2	Street	Addres	s (P.O. Box Number is Not A	Acceptable)			
NORTH MIAMI BEACH FL 33162    B4    City	490 NE 17	77TH ST.			100	<del> </del>			<u> </u>			1
T1. 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 Statio of Florida, Such change has authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SUBMINITE TO PROVIDE THE PROPRIET AND DIRECTORS 113. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  OFFICERS AND DIRECTORS IN 12.  ITILE PD DELETE 1.1 TITLE 1.2 Change Addition TITLE 1.3 STREET ADDRESS 1.1	NORTH M	iami Beach Fl 33162			83							_
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INTERED AND ALBERT A  STREET ADDRESS  CITY-ST-ZP  ITILE  VD  SANDAIRE, JOSEPH  STREET ADDRESS  CITY-ST-ZP  MIAMI FL 33167  TILE  TD  OBLETE  33 STREET ADDRESS  CITY-ST-ZP  MIAMI FL 33167  TILE  TD  OBLETE  33 STREET ADDRESS  CITY-ST-ZP  TILE  SD  OBLETE  34 STREET ADDRESS  CITY-ST-ZP  TILE  SD  OBLETE  44 TITLE  SD  OBLETE  45 TITLE  SD  OBLETE  44 TITLE  SD  OBLETE  45 TITLE  SD  OBLETE  55 TIME  SANDAIRE, ANTENINE  STREET ADDRESS  CITY-ST-ZP  TITLE  D  OBLETE  55 TIME  SANDAIRE, ANTENINE  STREET ADDRESS  CITY-ST-ZP  TITLE  D  OBLETE  55 TIME  SANDAIRE, ANTENINE  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  NORTH MIAMI BEACH FL 33162  TITLE  OBLETE  AL CITY-ST-ZP  TITLE  D  OBLETE  AL TITLE  SD  OCHANGE  Addition  Change  Addition	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Regi	Istered Ager	nt elignature r	equired w	rhan reinstating)			20 IN 42	8
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.3(3). Florida Statutes, I further certify that the information				L				•	•	-		1
	14. I hereby	certify that the information supplied with	h this filing does n	ot qualify for the	exempt	ion stated	in Se	ctics (1/0/1/3)(1). Florida Sta	atules. I further cert	fy that the in	formation	_

indicated on this trimital report or supplemental annual report is true and accurate and that my signature is officer or director of the corporation or the receiver or trustee empowered to execute this factor as require Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.