FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 23 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P31139 (9)

1. Corporation Name
CHRISTIAN FAMILY LIFE INCORPORATED

Principal Place of Business	Mailing Address
% CHRISTIAN FAMILY LIFT P.O. BOX 1550 WINDERMERE FL 34786	% CHRISTIAN FAMILY LIFT P.O. BOX 1550 WINDERMERE FL 34786

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/01/1990
3a. Date of Last Report: 05/01/1994
4. FEI Number: 75-1374621 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 Christian Family Life	26
Suite, Apt. #, etc. 22 9900 Twinlakes Parkway	Suite, Apt. #, etc. 27
City & State 23 Charlotte, N.C.	City & State 28
Zip 24 28269 — Country 25 USA	Zip 29 — Country 30

9. Name and Address of Current Registered Agent

MARK JOHNSTON
1133 MISSION RIDGE CT.
ORLANDO FL 32833

10. Name and Address of New Registered Agent

81 Name: Mark Johnston
82 Street Address (P.O. Box Number is Not Acceptable): 1133 Mission Ridge Ct.
83
84 City: Orlando — FL — 85 Zip Code: 32833

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, 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	PD	1.1 TITLE		☐ Change ☐ Addition
NAME	MEREDITH, DONALD R.	1.2 NAME		
STREET ADDRESS	4832 WINGROVE BLVD	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP		
TITLE	D	2.1 TITLE		☐ Change ☐ Addition
NAME	MERRITT, CHUCK	2.2 NAME		
STREET ADDRESS	5338 FOXSHIRE CT.	2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32819	2.4 CITY-ST-ZIP		
TITLE	VD	3.1 TITLE	D	☒ Change ☐ Addition
NAME	PHILLIPS, JERRY	3.2 NAME	Kent Strechi	
STREET ADDRESS	390 N ORANGE AVE. #2600	3.3 STREET ADDRESS	2529 Norfolk Rd.	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	Orlando, FL 32819	
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	AMERMAN, MARK W.	4.2 NAME		
STREET ADDRESS	1962 MAPLE LEAF DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	WINDERMERE FL	4.4 CITY-ST-ZIP		
TITLE	DST	5.1 TITLE		☐ Change ☐ Addition
NAME	ARDAN, IVAN	5.2 NAME		
STREET ADDRESS	390 N ORANGE AVE. #2600	5.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	MARK JOHNSTON	6.2 NAME		
STREET ADDRESS	1133 MISSION RIDGE CT.	6.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32835	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: J. Mark Johnston — 3/20/95 (Date) — (407) 876-6678 (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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