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Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P38228** (3)

1. Corporation Name

CHRISTIAN WRITERS INSTITUTE, INC.

Principal Place of Business

800 RINEHART RD
LAKE MARY FL 32746
US

Mailing Address

P. O. BOX 952248
LAKE MARY FL 32795-2248
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/07/1992

4. FEI Number

36-2614903

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

DOSS, THOMAS E., III
500 E. ALTAMONTE DR., SUITE 210
ALTAMONTE SPRINGS FL 32701

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

TITLE C ☐ DELETE

NAME WALKER, ROBERT D
STREET ADDRESS 555 NW 4TH AVE., APT 506
CITY-ST-ZIP BOCA RATON FL

TITLE VD ☐ DELETE

NAME SHIBLEY, DAVID
STREET ADDRESS 1910 WINDHILL CIR
CITY-ST-ZIP ROCKWALL TX

TITLE P ☐ DELETE

NAME STRANG, STEPHEN E
STREET ADDRESS 627 ESTATES PL
CITY-ST-ZIP LONGWOOD FL

TITLE D ☐ DELETE

NAME NORTON, WILL JR
STREET ADDRESS 206 AVERY HALL
CITY-ST-ZIP LINCOLN NE

TITLE S ☐ DELETE

NAME BARBARA WALKER
STREET ADDRESS 555 NW 4TH AVE., APT. 506
CITY-ST-ZIP BOCA RATON FL

TITLE TD ☐ DELETE

NAME HUELAN H. GRIER
STREET ADDRESS 100 FOREST PARK CT
CITY-ST-ZIP LONGWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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)(l), 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 Required

1-16-98

407-333-0600

CH2E037 (10/97)