SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400001425 (5) THE CHRISTIAN FOCUS, INC.												
Principa! Place	ailing Address					T INDVINCES IND SOUR DIRECTOR COURS CONTRACTOR	 	1 id i ni a) ()	IT 11011 BHI 1001			
725 KINGSLEY ORANGE PARK	.O. BOX 2891 RANGE PARK FL 3220	FL 32267			Date Incorporated or Quastied				ast Benort			
						3.	12/29/1993	09/15/1995				
2. Principal Pla	ace of Business	2a. Mailing Address				4	. FEI Number 59-3222731			Applied For Not Applicable		
Suite, Apt. #	, etc	ļ,	Suite, Apt. #, etc.			5	. Certificate of Status Desired		-	75 Additional ee Required		
City & Stale		28	Cily & State				Election Campaign Financing Trust Fund Contribution		Ad	.00 May Be doed to Fees		
Zip 24	Country 25	29	Zip					l. This corporation has liability for Florida Statutes	Yes No			
24	9. Name and Address of Curr	17.7.1	tered Agent				10). Name and Address of New Re	gistered	Agent		
769	JONES, TERRANCE A 769 BLANDING BOULEVARD ORANGE PARK FL 32065				82 83 84	Street Add	Address (P.O. Box Number is Not Acceptable)				85 Zip Code	
office or re agent 1 ar	to the provisions of Sections 607.0 agistered agent, or both, in the Stem familiar with, and accept the ob- Secular speed or respect to an offer potential OF LICERS.	age of Fight	of Section 607.0505,	Florida Stat	utes	-named corp the corporati ntsignative requ		on submits this statement for the p board of directors. Thereby accept connecting. ADDITIONS/CHANGES TO OFFI	urpose of tithe appo	changi ointmen	CTORS IN 12	
TITLE	D	DELETE		111	1111116					Cr	hange 🔲 Additor	
	FOSTER, TERESA D		<u>.</u>	12 N	IAME	ł						
NAME STREET ADDRESS	198 PASSAGE DRIVE				1.3 STREET ADDRESS							
CITY - ST - ZIP	ORANGE PARK FL 32073				1 4 CITY - SI - ZIP 2 1 TILLE					T T C	nange Addition	
TITLE			DELETE	I - '							, <u>-</u>	
NAME					MAME							
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP			T 1 05: 57			ST-ZIP				Πc	hange Addition	
TITLE			DELETE	31	TITLE	ļ				<u> </u>	, Ц	

6.3 STREET ADDRESS STREET ADDRESS 6.4 CHY - \$1. 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)(k). Florida Statutes I further certify that the information indicated on this annual report of 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

3.2 NAME

4.1 TITLE

4 2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 City - ST - ZIP

4.4 CITY ST-ZIP

5 1 TITLE

5.2 NAME

6.1 THLE

6 2 NAME

34 CITY-ST ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

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TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

CITY-ST-ZIP

OF SIGNING OFFICER OR DIRECTOR

DELFIE

DELETE

DELETE

8/6/96

***500.00

Change Addition

Change Addition

9000019236B9 rage Addition -08/15/96--01078--033

(36/8)