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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000066741

1. Corporation Name

THE CHURCH DIRECTORY, INC.

Principal Place of Business Mailing Address 2720 ALOMA AVE. 2720 ALOMA AVE. WINTER PARK FL 3279? WINTER PARK FL 32792 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualifed 07/27/1998 Applied For 4, FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Feguired 22 27 \$5,0() May Be City & State 6. Election Campaign Financing City 8. State Trust Fund Contribution Added to Fees 28 23 8. This corporation owes the current year Intangible Country Zip Cc untry Zip ZNo Yes Personal Property Tax. 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name ERMISCH, DORIS J Street Address (P.O. E ox Number is Not Acceptable) 2720 ALOMA AVE. WINTER PARK FL 32792 83 Zip Code 85 City 11. Pursuant to the provisions of Sections 607.05.02 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. SIGNAT JRE OA F (NOTE: Registered Agent signature equired when reinstating) Signature, typed or printer name of registered at ent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE TITLE ERMISCH, DORIS J 1.2 NAME NAME 1.3 STREET ADDRESS 2720 ALOMA AVE. STREET ADDRESS WINTER PARK FL 32792 1.4 CITY-ST-ZIP CITY-ST-ZIF Addition ☐ Change □ DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIL Addition Change ☐ DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4, CITY-ST-ZIP CITY-ST-ZIF Change Addition ☐ DELETE 4 1 TITLE TITI F 4.2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Addition Change □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF Change Addition 6.1 TITLE ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIF

6.4 CITY-ST-ZIP 14. The eby certify that the information supplied with this filing does not qualify for the exemption state 1 in Section 119 07(3)(i), Florida Statutes. I further certify that the information

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indicated on this annual report or supplemental annual report is true and a courate 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

CR2E034.(11/98)