Entity Name: CORNERSTONE CHRISTIAN CHURCH OF AVON PARK, INC.			INC.	Secretary of State CC1660104774	
<b>Current Prir</b> 1003 W PINE S AVON PARK, F			,	CC 1000 104774	
Current Mai	ling Address:				
1003 W PIN AVON PARH	E ST K, FL 33825 US				
FEI Number: 90-0785015			Certificate of Sta	atus Desired: No	
Name and A	ddress of Current Registered Agent:				
KINCER, KEITH 97 W LAKE DA AVON PARK, F	MON DR				
	2 33023 03				
	I entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the	e State of Florida.	
The above named		stered office or regis	tered agent, or both, in the	e State of Florida. 01/25/2018	
The above named	d entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the		
The above named	entity submits this statement for the purpose of changing its regis E: KEITH J KINCER Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the	01/25/2018	
The above named	entity submits this statement for the purpose of changing its regis E: KEITH J KINCER Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the	01/25/2018	
The above named SIGNATURE Officer/Dire	entity submits this statement for the purpose of changing its regis E: KEITH J KINCER Electronic Signature of Registered Agent Ctor Detail :			01/25/2018 Date	
The above named SIGNATURE Officer/Dire Title	entity submits this statement for the purpose of changing its regis E: KEITH J KINCER Electronic Signature of Registered Agent ctor Detail : T	Title	D	01/25/2018 Date	
The above named SIGNATURE Officer/Dire Title Name	entity submits this statement for the purpose of changing its regis E KEITH J KINCER Electronic Signature of Registered Agent Ctor Detail : T KINCER, KEITH J 97 W LAKE DAMON DR	Title Name	D TOMPKINS, GENE F	01/25/2018 Date	
The above named SIGNATURE Officer/Dire Title Name Address	entity submits this statement for the purpose of changing its regis E KEITH J KINCER Electronic Signature of Registered Agent Ctor Detail : T KINCER, KEITH J 97 W LAKE DAMON DR	Title Name Address	D TOMPKINS, GENE F 901 BARLOW AVE	01/25/2018 Date	

Address

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002322

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NANCY TOMPKINS

97 W LAKE DAMON DR

City-State-Zip: AVON PARK FL 33825

Address

Electronic Signature of Signing Officer/Director Detail

SECRETARY

901 BARLOW AVE

City-State-Zip: AVON PARK FL 33825

01/25/2018

**FILED** Jan 25, 2018

**Secretary of State** 

Date