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Mar 04 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 702929 (1)

1. Corporation Name

TWIN LAKES BAPTIST CHURCH TRUSTEES, INC.



Principal Place of Business

Mailing Address

4701 N W 11TH AVE  
FT LAUDERDALE FL 33309

4701 N W 11TH AVE  
FT LAUDERDALE FL 33309-3815

3. Date Incorporated or Qualified  
09/22/1961

3a. Date of Last Report  
03/15/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
59-2485697

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, ROBERT W.  
1091 NW 47 STREET  
FT LAUDERDALE FL 33309

81 Name  
Fred Faircloth

82 Street Address (P.O. Box Number is Not Acceptable)  
4141 N.W. 10th Terrace

83

84 City  
Fort Lauderdale

FL

85 Zip Code  
33309

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 *Fred Faircloth* PRESIDENT *Fred Faircloth*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

2/19-97  
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME FAIRCLOTH, FRED T  
STREET ADDRESS 4141 N W 10TH TERR  
CITY-ST-ZIP FT LAUD, FL 00000

1.1 TITLE PD  Change  Addition  
1.2 NAME FAIRCLOTH, FRED  
1.3 STREET ADDRESS 4141 NW 10 TERR  
1.4 CITY-ST-ZIP FT LAUDERDALE, FL 33309

TITLE PD  DELETE  
NAME CLARK, ROBERT.  
STREET ADDRESS 1091 N.W. 47 STREET.  
CITY-ST-ZIP FT. LAUDERDALE FL

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME PAULEY, CLESTON  
STREET ADDRESS 708 N W 42ND ST  
CITY-ST-ZIP FT LAUD, FL 00000

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ST  DELETE  
NAME ROBINETTE, JAMES  
STREET ADDRESS 4101 N W 12TH AVE  
CITY-ST-ZIP FT LAUD, FL 00000

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE D  Change  Addition  
5.2 NAME CAIN, CARLTON  
5.3 STREET ADDRESS 3621 NE 15 AVENUE  
5.4 CITY-ST-ZIP POMPANO BCH., FL. 33064

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE D  Change  Addition  
6.2 NAME TYSON, BILLY  
6.3 STREET ADDRESS 4220 NW 10 TERRACE  
6.4 CITY-ST-ZIP FT LAUDERDALE, FL. 33309

14. I do hereby certify that the information supplied with this filing 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: *James Robinette* JAMES ROBINETTE 2/5/97 954-776-6957  
Signature and typed or printed name of signing officer or director Date Daytime Phone # 003584

CR2E037 (9/96)