

FILE NOW: FILING FEE IS \$61.25

FILED

May 19 1997 8:00am
Secretary of State

| | | |
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| NONPROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **705948** (8)

1. Corporation Name

FIRST BAPTIST CHURCH OF INDIAN ROCKS, INC.



| | |
|--|---|
| Principal Place of Business 12685 ULMERTON ROAD LARGO FL 34644 | Mailing Address 12685 ULMERTON ROAD LARGO FL 33774-3603 |
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| | |
|--|--|
| 3. Date Incorporated or Qualified 07/24/1963 | 3a. Date of Last Report 01/31/1996 |
|--|--|

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|---|----------------------------------|
| 2. Principal Place of Business 21 | 2a. Mailing Address 26 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 | City & State 28 |
| Zip 24 | Country 25 |
| Zip 29 | Country 30 |

| | |
|--|--|
| 4. FEI Number 59-0942408 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| | | | | | | | |
|--|--|--|--|--|--------------------------------|--|--|
| 9. Name and Address of Current Registered Agent GESSNER, MAX R. SR. 11511 94TH ST. N. LARGO FL 34643 | | | | 10. Name and Address of New Registered Agent | | | |
| | | | | 81 Name Timothy A. FERGUSON | | | |
| | | | | 82 Street Address (P.O. Box Number is Not Acceptable) 10392 136th St. N. | | | |
| | | | | 83 | | | |
| | | | | 84 City LARGO | 85 Zip Code FL 33774 | | |

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]* **Timothy A. Ferguson, Church Business Administrator** 1/3/97
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|--|---|--|
| TITLE PD | <input checked="" type="checkbox"/> DELETE | 1.1 TITLE PD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME FOREHAND, DONALD | | 1.2 NAME Rowery, Kirk | |
| STREET ADDRESS 1715 30TH LANE SW | | 1.3 STREET ADDRESS 2750 Pelham Rd. N. | |
| CITY-ST-ZIP LARGO FL | | 1.4 CITY-ST-ZIP SL. PETE, FL | |
| TITLE VD | <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME LEDFORD, STEVE | | 2.2 NAME | |
| STREET ADDRESS 11738 81ST AVE. N. | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP SEMINOLE FL | | 2.4 CITY-ST-ZIP | |
| TITLE TD | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME SMITH, WILLIAM | | 3.2 NAME | |
| STREET ADDRESS 12601-126TH AVE., N.#243 | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP LARGO FL | | 3.4 CITY-ST-ZIP | |
| TITLE SD | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME GILLETTE, DEBORAH | | 4.2 NAME | |
| STREET ADDRESS 8952 INDIAN KEY TRAIL | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP SEMINOLE FL | | 4.4 CITY-ST-ZIP | |
| TITLE EVD | <input checked="" type="checkbox"/> DELETE | 5.1 TITLE VD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME GESSNER, MAX R., SR. | | 5.2 NAME Timothy A. Ferguson | |
| STREET ADDRESS 11511 94TH ST. N. | | 5.3 STREET ADDRESS 10392 136th St. N. | |
| CITY-ST-ZIP LARGO FL | | 5.4 CITY-ST-ZIP LARGO, FL | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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: *[Signature]* **Timothy A. Ferguson, Church Business Administrator** 1/3/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0051797

CR2E037 (9/96)