

FILE NOW: FILING FEE IS \$61.25

FILED
May 14 1998 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # 706053 (6)
1. Corporation Name
FIRST BAPTIST CHURCH OF WINTER PARK, INC.



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| Principal Place of Business 1021 N NEW YORK AVE WINTER PARK FL 32789 US | Mailing Address P OBOX 470 WINTER PARK FL 32790 US |
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|---|-------------------------------|
| 3. Date Incorporated or Qualified 08/19/1963 | Applied For Not Applicable |
| 4. FEI Number 59-0942750 | |
| 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 | |
| 7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

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

9. Name and Address of Current Registered Agent
**HUFFMAN, REX, F.
1128 OXFORD RD.
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent
81 Name **Franklin O. Cowart Jr.**
82 Street Address (P.O. Box Number is Not Acceptable) **420 Cornwall Rd.**
83
84 City **Winter Park** FL 85 Zip Code **32792**

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 I accept the obligations of, Section 617.0507, Florida Statutes.

SIGNATURE *Franklin O. Cowart Jr.* **Franklin O. Cowart Jr.** **4/29/98**
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 | D <input type="checkbox"/> DELETE | 1.1 TITLE | Tr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | AUSLEY, EDWARD R | 1.2 NAME | |
| STREET ADDRESS | \$323 NEWHALL AVENUE | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | 1.4 CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> DELETE | 2.1 TITLE | Tr <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | SETTLE, ROBERT F | 2.2 NAME | Jim Kirkwood |
| STREET ADDRESS | 2322 FIELDINGWOOD RD | 2.3 STREET ADDRESS | 6032 Twin Lakes Dr. |
| CITY-ST-ZIP | MAITLAND FL | 2.4 CITY-ST-ZIP | Oviedo, FL 32765 |
| TITLE | S <input type="checkbox"/> DELETE | 3.1 TITLE | S/Tr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HOHMAN, GLENN W | 3.2 NAME | |
| STREET ADDRESS | 1910 SUMMERLAND AVENUE | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | WINTER PARK FL | 3.4 CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> DELETE | 4.1 TITLE | Tr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SNEED, ROBERT | 4.2 NAME | |
| STREET ADDRESS | 2853 BROOKSIDE COURT | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | MAITLAND FL | 4.4 CITY-ST-ZIP | |
| TITLE | PT <input type="checkbox"/> DELETE | 5.1 TITLE | C/Tr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | RAY, JOE W | 5.2 NAME | |
| STREET ADDRESS | 5174 LAZY OAKS DR. | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | WINTER PARK FL | 5.4 CITY-ST-ZIP | |
| TITLE | T <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | COWART JR. FRANKLIN O. | 6.2 NAME | |
| STREET ADDRESS | 420 CORNWALL RD | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | WINTER PARK FL | 6.4 CITY-ST-ZIP | |

14. I 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 *Joe W. Ray* **Joe W. Ray** **4/29/98** **(407) 671-6639**

CR2E037 (10/97)