

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR -2 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 707332 (3)
1. Corporation Name
LANDMARK BAPTIST CHURCH INC.

Principal Place of Business Mailing Address
400 S. ORLANDO AVE. 400 S. ORLANDO AVE.
MAITLAND FL 32751 MAITLAND FL 32751
US US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/22/1964 3a. Date of Last Report 02/08/1994
4. FEI Number NOT APPLICABLE 59-3170438 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$6.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FORREST, JERRY R.
4591 CHARLEEN TERRACE
ORLANDO FL 32808

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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.

SIGNATURE JERRY R. FORREST, PRES. DIRECTOR *Jerry R. Forrest* FEB. 8, 1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

TITLE	VD
NAME	KOONTZ, HARRY
STREET ADDRESS	5617 CLEARVIEW DR.
CITY - ST - ZIP	ORLANDO FL
TITLE	STD
NAME	BANKS, JUDY
STREET ADDRESS	807 GRANDVIEW AVE
CITY - ST - ZIP	ALTAMONTE SPRNGS FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRES.-DIRECTOR	☐ Change ☒ Addition
1.2 NAME	JERRY R. FORREST	
1.3 STREET ADDRESS	4591 CHARLEEN TERRACE	
1.4 CITY - ST - ZIP	ORLANDO, FLA 32808	☒ Change ☒ Addition
2.1 TITLE	VICE PRES.-DIRECTOR	
2.2 NAME	FRANK GRIGGS	
2.3 STREET ADDRESS	622 WYMORE RD.	
2.4 CITY - ST - ZIP	WINTER PARK, FLA. 32789	☐ Change ☒ Addition
3.1 TITLE	DIRECTOR	
3.2 NAME	JAMES TERRY	
3.3 STREET ADDRESS	2519 CHANTILLY AVE.	
3.4 CITY - ST - ZIP	WINTER PARK, FLA. 32789	☒ Change ☒ Addition
4.1 TITLE	SECT.-TREA.-DIRECTOR	
4.2 NAME	FRAN A. FORREST	
4.3 STREET ADDRESS	4591 CHARLEEN TERRACE	
4.4 CITY - ST - ZIP	ORLANDO, FLA. 32808	☐ Change ☒ Addition
5.1 TITLE	DIRECTOR	
5.2 NAME	FRANK JOHNSON	
5.3 STREET ADDRESS	3 SOUTH BUENA VISTA	
5.4 CITY - ST - ZIP	ORLANDO, FLA. 32811	☐ Change ☐ Addition
6.1 TITLE		
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that this 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 resolver 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:

Jerry R. Forrest

JERRY R. FORREST

FEB. 8, 1995

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature (Name)