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May 20 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 707733 (2)

1. Corporation Name

THE FIRST BAPTIST CHURCH OF ST. CLOUD, FLORIDA INCORPORATED INC.



Principal Place of Business

Mailing Address

1717 13TH ST  
ST. CLOUD FL 34769

1717 13TH ST.  
ST. CLOUD FL 34769-4308  
US

3. Date Incorporated or Qualified 08/21/1964  
3a. Date of Last Report 02/14/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-1163072

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRICE, JACK  
805 MONTANA  
ST. CLOUD FL 34769

81 Name JEFFERY SCOWDEN  
82 Street Address (P.O. Box Number is Not Acceptable) 9898 CREEK BED CIRCLE  
83  
84 City ST. CLOUD FL 85 Zip Code 34769

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

*Jeffery Scowden*

2/11/97

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	C	1.1 TITLE	T
NAME	PRICE, JACK	1.2 NAME	ROLAND VAN TASSEL
STREET ADDRESS	805 MONTANA AVE	1.3 STREET ADDRESS	3150 PACKARD AVENUE
CITY-ST-ZIP	ST CLOUD FL	1.4 CITY-ST-ZIP	ST CLOUD, FL 34772
TITLE	T	2.1 TITLE	
NAME	TERBEE, THOMAS	2.2 NAME	
STREET ADDRESS	2221 SPRING LAKE CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST CLOUD FL	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	P/D
NAME	COLLIER, THOMAS C.	3.2 NAME	
STREET ADDRESS	2900 GREEN ACRES ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. CLOUD FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	
NAME	WHITMORE, PAMELA	4.2 NAME	
STREET ADDRESS	653 ADRIANE PARK CIRCLE	4.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	V/D
NAME	SHOEMAKE, CHARLES B.	5.2 NAME	
STREET ADDRESS	4270 FANNY BASS ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. CLOUD FL	5.4 CITY-ST-ZIP	
TITLE	ST	6.1 TITLE	
NAME	TWEEDIE, ARTHUR	6.2 NAME	
STREET ADDRESS	1875 RAYMOND DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST CLOUD FL	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:

*Arthur Tweedie*

2-11-97

Signature, typed or printed name of signing officer or director

Date

Daytime Phone # 0070927

CR2E037 (9/96)