

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 707833 (0)

1. Corporation Name
THE KEENE TERRACE BAPTIST CHURCH, INC.



Principal Place of Business: OLD KEENE ROAD AND LAKE AVENUE, 1901 MCMULLEN RD., LARGO FL 34641-8146
Mailing Address: OLD KEENE ROAD AND LAKE AVENUE, 1901 MCMULLEN RD., LARGO FL 34641-8146

3. Date Incorporated or Qualified: 09/17/1964
3a. Date of Last Report: 04/26/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number: 59-1056297
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
**BRASHER, JAMES
108 JUDY LEE DR.
LARGO FL 33541**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

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: _____ (NOTE: Registered Agent signature required when registering) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DONEHOO, ROBERT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1894 OAKDALE LANE S	1.2 NAME	
STREET ADDRESS	CLEARWATER FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	PD FUNKHOUSER, IVAN	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1300 SOUTH BELCHER ROAD	2.2 NAME	
STREET ADDRESS	LARGO FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD BOYD, CLAYTON S.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	441 TRINIDAD LANE	3.2 NAME	
STREET ADDRESS	LARGO FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D PADGETT, RUBY, MRS.	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1740 ROSERY ROAD	4.2 NAME	
STREET ADDRESS	CLEARWATER FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D POOLE, CARL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	880 MANDALAY AVENUE #513N	5.2 NAME	
STREET ADDRESS	CLEARWATER FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D BRASHER, JAMES H.	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	108 JUDY LEE DR.	6.2 NAME	
STREET ADDRESS	LARGO FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 H. Brasher* James Brasher 4-25-96 (813)585-9001
DAYTIME PHONE #

CR2E037 (12/95)