

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 # 708480 (9)

1. Corporation Name

HAVEN BAPTIST CHURCH, INC.

Principal Place of Business

2105 KING RD. S.W.
WINTER HAVEN FL 33880

Mailing Address

2105 KING RD. S.W.
WINTER HAVEN FL 33880



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**HAMM, LARRY C.
2665 GALE ROSE DRIVE
LAKELAND FL 33805**

10. Name and Address of New Registered Agent

81 Name

Frank Daniel Gail Jr.

82 Street Address (P.O. Box Number is Not Acceptable)

134 Homewood Drive

84 City

Winter Haven

FL

85 Zip Code

33880

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

Frank Daniel Gail Jr.

Frank Daniel Gail Jr.

2/5/96

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME **HAMM, LARRY C.**
STREET ADDRESS **2665 GALE ROSE DRIVE**
CITY - ST - ZIP **LAKELAND FL 33805**

TITLE VD ☐ DELETE

NAME **GALL, DANNY**
STREET ADDRESS **134 HOMEWOOD DRIVE**
CITY - ST - ZIP **WINTER HAVEN FL 33880**

TITLE VD ☐ DELETE

NAME **MCCARD, HENRY**
STREET ADDRESS **646 OLEANDER DRIVE, SE.**
CITY - ST - ZIP **WINTER HAVEN FL 33880**

TITLE VD ☐ DELETE

NAME **SMITH, DR. ROBERT,**
STREET ADDRESS **800 AVE. M, S.E.**
CITY - ST - ZIP **WINTER HAVEN FL 33880**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME **Gail, Frank Daniel Jr.**
1.3 STREET ADDRESS **134 Homewood Drive**
1.4 CITY - ST - ZIP **Winter Haven, FL 33880**

2.1 TITLE VD ☒ Change ☐ Addition

2.2 NAME **Hamm, Larry C**
2.3 STREET ADDRESS **2665 Gale Rose Drive**
2.4 CITY - ST - ZIP **Lakeland, FL 33805**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

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 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:

Frank Daniel Gail Jr.

Frank Daniel Gail Jr.

2/5/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)