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Jun 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 708688 (7)

1. Corporation Name
TALLAHASSEE BAPTIST CHURCH, INC.



Principal Place of Business 4225 CRAWFORDVILLE RD TALLAHASSEE FL 32310-7032	Mailing Address 4225 CRAWFORDVILLE RD TALLAHASSEE FL 32310-7032
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3. Date Incorporated or Qualified 03/23/1965	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 Apalachee Elementary School Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. Box 2156 Suite, Apt. #, etc.
22 650 Trojan Trail City & State	27 City & State
23 Tallahassee, FL Zip	28 Tallahassee, FL Zip
24 32311 Country USA	29 32316-2156 Country USA

4. FEI Number 05-0025004	Applied For Not Applicable
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**PAUL DONALDSON
6294 WILLIAMS RD.
TALLAHASSEE FL 32311**

10. Name and Address of New Registered Agent

81 Name **Rev. Dennis L. Coxwell**
82 Street Address (P.O. Box Number is Not Acceptable) **825 Burntleaf Lane**
83
84 City **Tallahassee** FL 85 Zip Code **32310**

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 *Dennis L. Coxwell* **Dennis L. Coxwell, minister** DATE **5-28-97**

12. OFFICERS AND DIRECTORS		DELETE
TITLE	DT	<input type="checkbox"/>
NAME	LAWHON, JAMES M.	
STREET ADDRESS	118 BASS STREET	
CITY-ST-ZIP	TALLAHASSEE FL 32310	
TITLE	DS	<input type="checkbox"/>
NAME	VOWELL, CHRIS	
STREET ADDRESS	8522 TWIN LAKES LANE	
CITY-ST-ZIP	TALLAHASSEE FL 32311	
TITLE	DP	<input type="checkbox"/>
NAME	DONALDSON, PAUL D.	
STREET ADDRESS	6294 WILLIAM RD.	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	D/P	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	Rev. Dennis L. Coxwell		
1.3 STREET ADDRESS	825 Burntleaf Lane		
1.4 CITY-ST-ZIP	Tallahassee, FL 32310		
2.1 TITLE	Tr	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2 NAME	Lawhorn, James M.		
2.3 STREET ADDRESS	118 Bass Street		
2.4 CITY-ST-ZIP	Tallahassee, FL 32310		
3.1 TITLE	Tr/T	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.2 NAME	Chris Vowell		
3.3 STREET ADDRESS	8522 Twin Lakes Lane		
3.4 CITY-ST-ZIP	Tallahassee, FL 32311		
4.1 TITLE	Tr	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.2 NAME	Donaldson, Paul D.		
4.3 STREET ADDRESS	6294 Williams Rd.		
4.4 CITY-ST-ZIP	Tallahassee, FL 32311		
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
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.

CR2E037 (9/96)