

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 709640 (7)
1. Corporation Name
THE FIFTH STREET BAPTIST CHURCH OF KEY WEST, INC



Principal Place of Business Mailing Address
2318 FOGARTY AVENUE **2318 FOGARTY AVENUE**
KEY WEST FL 33040 **KEY WEST FL 33040**

3. Date Incorporated or Qualified **09/23/1965** 3a. Date of Last Report **02/01/1995**
4. FEI Number **70-9640540** 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

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 Zip
24 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

BOZA, EDWARD
2226 HARRIS AVENUE
KEY WEST FL 33040

10. Name and Address of New Registered Agent

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 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

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	P	☐ DELETE
NAME	HETHERINGTON, ROBERT H.	
STREET ADDRESS	3504 EAGLE AVE	
CITY-ST-ZIP	KEY WEST FL	
TITLE	D	☐ DELETE
NAME	GIBSON, BEN	
STREET ADDRESS	3608 NORTHSIDE DRIVE	
CITY-ST-ZIP	KEY WEST FL	
TITLE	SD	☐ DELETE
NAME	BOZA, EDWARD R	
STREET ADDRESS	2226 HARRIS AVE	
CITY-ST-ZIP	KEY WEST FL	
TITLE	T	☐ DELETE
NAME	PARKER, WILLIAM	
STREET ADDRESS	2824 SEIDENBERG AVE	
CITY-ST-ZIP	KEY WEST FL	
TITLE	D	☐ DELETE
NAME	LETO, DAROLD	
STREET ADDRESS	3705 PEARLMAN CT	
CITY-ST-ZIP	KEY WEST FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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:

Edward R. Boza
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 4 1998
Date

305-2942255
Daytime Phone #

CR2E037 (12/95)