

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 18 1997 8:00am  
Secretary of State

| NONPROFIT CORPORATION<br>ANNUAL REPORT<br>1997                                                                                                                                                                                                                                                                                                                                                                                                                  |                              | <br>FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| <b>DOCUMENT # 711962 (1)</b><br>1. Corporation Name<br><b>ISLAND VIEW BAPTIST CHURCH, INC.</b>                                                                                                                                                                                                                                                                                                                                                                  |                              |                                                                                                                                                                                         |                                     |
| Principal Place of Business<br><b>900 PARK AVENUE<br/>ORANGE PARK FL 32073</b>                                                                                                                                                                                                                                                                                                                                                                                  |                              | Mailing Address<br><b>900 PARK AVENUE<br/>ORANGE PARK FL 32073-4120</b>                                                                                                                 |                                     |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country                                                                                                                                                                                                                                                                                                                                                             |                              | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country                                                                                                |                                     |
| 3. Date Incorporated or Qualified<br><b>12/16/1966</b>                                                                                                                                                                                                                                                                                                                                                                                                          |                              | 3a. Date of Last Report<br><b>03/18/1996</b>                                                                                                                                            |                                     |
| 4. FEI Number<br><b>59-1310919</b>                                                                                                                                                                                                                                                                                                                                                                                                                              |                              | Applied For<br>Not Applicable                                                                                                                                                           |                                     |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                       |                              | <b>\$8.75</b> Additional Fee Required                                                                                                                                                   |                                     |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                              |                              | <b>\$5.00</b> 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<br><b>DETTMER, RON<br/>2756 CONNIE CIRCLE<br/>ORANGE PARK FL 32073</b>                                                                                                                                                                                                                                                                                                                                          |                              | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>84 City<br><b>FL</b> 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 _____<br><small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.)</small> DATE _____                                                                                                                                                                                                                                                                       |                              |                                                                                                                                                                                         |                                     |
| 12. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                      |                              | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                   |                                     |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                           | DT                           | 11 TITLE                                                                                                                                                                                | D                                   |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                            | SNIDER, CLARENCE L           | 12 NAME                                                                                                                                                                                 | Evalyne Eckles                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 632 SAN ROBAR DR             | 13 STREET ADDRESS                                                                                                                                                                       | 1106 Lake Asbury Drive              |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ORANGE PARK FL               | 14 CITY-ST-ZIP                                                                                                                                                                          | Green Cove Springs FL 32043         |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                           | D                            | 21 TITLE                                                                                                                                                                                | D                                   |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                            | KUCKLUCK, PHILIP             | 22 NAME                                                                                                                                                                                 | Gene Treadway                       |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 676 KILCHURN DRIVE           | 23 STREET ADDRESS                                                                                                                                                                       | 2334 Stafford Drive                 |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ORANGE PARK FL               | 24 CITY-ST-ZIP                                                                                                                                                                          | Orange Park, FL 32073               |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                           | D                            | 31 TITLE                                                                                                                                                                                | AVP                                 |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <del>PETERSON, LEONARD</del> | 32 NAME                                                                                                                                                                                 | James F. Hoffman Jr. (Same as 1996) |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <del>2440 ELBOW ROAD</del>   | 33 STREET ADDRESS                                                                                                                                                                       | 5432 Gordon Ct.                     |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <del>ORANGE PARK FL</del>    | 34 CITY-ST-ZIP                                                                                                                                                                          | Orange Park, FL 32065               |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                           | D                            | 41 TITLE                                                                                                                                                                                | AVP                                 |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ZACHARIAS, ROBERT J          | 42 NAME                                                                                                                                                                                 | David Lohff (Same as 1996)          |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 5564 FORREST DRIVE           | 43 STREET ADDRESS                                                                                                                                                                       | 1825 Castille Drive                 |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ORANGE PARK FL               | 44 CITY-ST-ZIP                                                                                                                                                                          | Orange Park, FL 32073               |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                           | P                            | 51 TITLE                                                                                                                                                                                | AVP                                 |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                            | DETTMER, RON                 | 52 NAME                                                                                                                                                                                 | Paul V. McManus Jr.                 |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2756 CONNIE CIRCLE           | 53 STREET ADDRESS                                                                                                                                                                       | 2318 Torbay Drive                   |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ORANGE PARK FL               | 54 CITY-ST-ZIP                                                                                                                                                                          | Orange Park, FL 32073               |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                           | D                            | 61 TITLE                                                                                                                                                                                | DS                                  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                            | EASON, MARY                  | 62 NAME                                                                                                                                                                                 | Janet Metcalf (Same as 1996)        |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 5024 PINE AVENUE             | 63 STREET ADDRESS                                                                                                                                                                       | 2851 Birchwood Drive                |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ORANGE PARK FL               | 64 CITY-ST-ZIP                                                                                                                                                                          | Orange Park, FL 32073               |

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)